City of Algonac

805 St. Clair River Drive, PO Box 454, Algonac, MI 48001. 810-794-9361. www.cityofalgonac.org.

Rental License Application

1. DESCRIPTION OF REN	TAL		
☐ Single Family or ☐ Mu	ılti-Family Name of N	Multi-Family Development	No. of Units
Rental Address			
2. RENTAL OWNER			
Name		Street Address	
City	State	Zip Code	Cell Phone
Home Phone		Email Address	5
3. TENANT OR OWNER A	AGENT, IF APPLICA	BLE	
Name		Street Address	
City	State	Zip Code	Cell Phone
Home Phone		Email Address	i
4. SIGNATURE REQUIRE	D		
All the information provided	with this application is	true and correct, to the be	est of my knowledge and belief.
Applicant Signature:			Date:
5. REQUIRED			
☐ Single Family Rental I☐ Single Family Rental I☐ Single Family Rental I☐ Single Family Rental I	Inspection: \$80. At lea	ast once every two years.	
Multi Family Rental A	Annual Inspection: \$3	\$55 per unit. Expires one 800 up to 5 units. \$400 6 : \$25. For each 30 days la	to 11 units. \$500 12+ units.
☐ Photo copy of drive☐ HVAC inspection rep☐ Infill & Infiltration r	port from a licensed		