

TOWNSHIP OF SPRINGFIELD CERTIFICATE OF USE FOR RENTAL DWELLING UNITS

PLEASE PRINT CLEARLY UNLESS OTHERWISE NOTED.

PERMIT # _____

RENTAL DWELLING UNIT OR UNITS INFORMATION		
Address of Dwelling Unit or Units:	Number of Units to be Inspected: _____	
Purpose of Inspection (Check appropriate box): <input type="checkbox"/> Annual Inspection <input type="checkbox"/> Change of Ownership <input type="checkbox"/> Change of Lease <input type="checkbox"/> Reoccupation of Vacant Unit (s)		
Provide Square Footage of each bedroom: _____ _____	Provide Square Footage of the Living & Dining Room: _____ _____	
Number of Occupants Residing: _____		
OWNER INFORMATION		
Name: (If company, corporation or other entity, provide name of responsible agent)	Address:	Telephone #
Applicant sign and date:		
LANDLORD, REALTOR, MANAGER OR RESPONSIBLE AGENT INFORMATION		
Name: (If company, corporation or other entity, provide name of responsible agent)	Address:	Telephone #
Applicant sign and date:		
BUYER INFORMATION		
Name:	Telephone:	
Address:		
TENANT INFORMATION		
List the Full Name of the Occupants Residing in the Dwelling Unit:		
FEES		
Annual Certificate of Use: \$50.00 per Dwelling Unit	Inspection of a Single-Family Dwelling: \$50.00	
Inspection of Apartment/Dwelling Unit: \$25.00 per unit	Re-inspection fees: \$10.00 per inspection	

If you require additional space to completely answer a question, please use 8 1/2" x 11 1/2" white paper and attach the paper to the application.

