

Date Applied: _____

Rental Property Registration Application

Goshen Building Department

Municipal Building Annex

204 E. Jefferson St., Suite 5

Goshen, IN 46528-3716

(574) 534-1811 Fax: (574) 533-8626

Applicant: _____

Owner

Property Manager

Address: _____

City, State Zip _____

Phone Number: _____

Email: _____

Manager (if different than Owner): _____

Manager Address: _____

City, State Zip _____

Property Location: _____ **Total Units:** _____

Total Number of Parcels: _____ **Amount Due:** _____

NOTICE

In accordance with Goshen City Ordinances 4860 and 5001, effective July 2, 2019, annual registration fees for all rental units in a rental unit community or for all rental units on a separate parcel of real estate are **\$5.00**. Annual rental registration fees for all hotels/motels/rooming houses is **\$79.00**.

Please make checks payable to the City of Goshen and return to 204 E. Jefferson St., Suite 5, Goshen, Indiana 46528. **The Building Department should be made aware of any changes in ownership, address or telephone numbers.**

Registration receipt will be issued upon completion of the rental inspection.

RECEIPT

License #: _____ Applicant: _____

Rental Address: _____

Amount Pd: _____ Check/Cash/Credit Card Date Pd: _____ Date Expires: _____