

License No. _____

Inspection Month _____



City of West Chicago Application Rental Dwelling License

(Please type or print clearly)

COMPLEX NAME: _____

BUILDING ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

1. LEGAL OWNER(S) INFORMATION

NAME: _____ BIRTH DATE: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

TELEPHONE NUMBERS - WORK: _____ HOME: _____

NAME: _____ BIRTH DATE: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

TELEPHONE NUMBERS - WORK: _____ HOME: _____

If the owner is a land trust, please attach to this application a certified copy of a trust disclosure, including the name and address of each person(s) holding a beneficial interest and/or power of direction therein.

2. MANAGING AGENT INFORMATION

In the event that the owner of the multiple family dwelling resides outside the corporate limits of the city, the owner shall appoint a managing agent that:

1. Has an office at the multiple family dwelling with regular business hours;
2. Lives at the multiple family dwelling and has regular business hours thereat; or,
3. Has an office within 30 miles of the corporate limits of the city with regular business hours.

A managing agent shall be authorized to receive notices and process on behalf of the owner.

NAME: _____ BIRTH DATE: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

TELEPHONE NUMBERS - WORK: _____ HOME: _____

Please attach to this application, a copy of the written management agreement between the owner and the managing agent. If no written agreement exists, please attach an executed statement setting forth the terms of the managing agents authority to rent, manage, make expenditures.

3. REGISTERED AGENT OR PERSON ASSIGNED TO THE RENTAL DWELLING

If the Managing Agent is other than a natural person, please fill out the following section:

NAME: _____ BIRTH DATE: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

TELEPHONE NUMBERS - WORK: _____ HOME: _____

Every owner shall report to the City Clerk any change in the designation of any agent, at lease seven (7) days prior to such change.

4. JANITOR, ENGINEER OR MAINTENANCE PERSON(S) RESPONSIBLE FOR MAINTENANCE OF THE RENTAL DWELLING HEATING, COOLING, PLUMBING, AND ELECTRICAL SYSTEMS

NAME: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

TELEPHONE NUMBERS - WORK: _____ HOME: _____

NAME: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

TELEPHONE NUMBERS - WORK: _____ HOME: _____

Attached to the application shall be a statement of the janitor(s) or engineer(s) authority to maintain and repair the multiple-family dwelling and its systems, including emergency repairs.

5. PERSON(S) RESPONSIBLE FOR MAINTAINING THE (EXTERIOR) COMMON AREAS, INCLUDING PARKING LOTS, SIDEWALKS, LANDSCAPING ETC.

NAME: _____ BIRTH DATE: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

TELEPHONE NUMBERS - WORK: _____ HOME: _____

6. PERSON(S) OTHER THAN THOSE LISTED ELSEWHERE ON THIS APPLICATION, IF ANY, HAVING AUTHORITY TO MAKE ANY DECISION WITH RESPECT TO THE MANAGEMENT OR MAINTENANCE OF THE MULTIPLE FAMILY DWELLING

NAME: _____ BIRTH DATE: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

TELEPHONE NUMBERS - WORK: _____ HOME: _____

Please attach to this application, a written statement of this person's authority to manage, lease and/or maintain the multiple-family dwelling.

7. CONTRACTOR PROVIDING SERVICES FOR FIRE ALARM

NAME: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

TELEPHONE NUMBERS - WORK: _____ HOME: _____

Please attach to this application a copy of the most recent fire alarm test results and a copy of the service contract.

8. CONTRACTOR PROVIDING SERVICES FOR ELEVATOR

NAME: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

TELEPHONE NUMBERS - WORK: _____ HOME: _____

Please attach to this application a copy of the service contract.

9. PROPOSED ANNUAL IMPROVEMENTS

Please attach to this application, a copy of a plan evidencing what improvements, renovation(s) and/or replacements are budgeted for the license year.

10. LICENSE FEES

Each application for license shall be accompanied by a license fee. The license fee shall be determined by the following schedule:

<u>Number of Units Owned</u>	<u>License Fee</u>
Single Family, 2 Flats, Town homes	\$200.00 Per Building
Condominiums	\$200.00 Per Unit
Multiple Family Buildings	\$200.00 Per Building and \$20.00 Per Unit

The owner of a multiple-family dwelling containing more than one hundred (100) units may elect to pay the license fee in two (2) installments. The first installment shall be in the amount of fifty percent (50%) of the applicable license fee and shall be paid at the time of application. The balance of the applicable license fee shall be paid on or before July 1 of the license year. In the event the balance of the license fee is not paid on or before July 1 of the license year the license shall be deemed to have terminated on July 2 of the license year, without further action by the city.

If a completed license application is not submitted together with the required license fee prior to January 1 in a given year, the license fee shall be increased by an additional twenty percent (20%) on the first of each subsequent month, until such time as a complete license application and the required license fee is paid.

11. **NUMBER OF UNITS IN BUILDING:** _____

12. **NUMBER OF BUILDINGS IN COMPLEX** (if applicable): _____

13. **FEES**

LICENSE FEE: _____ AMOUNT ENCLOSED: _____

DATE: _____ CHECK NUMBER: _____

BALANCE DUE JULY 1 (if applicable): _____

14. **SIGNATURES**

I, the undersigned, hereby certify that:

- (A) The information submitted in this application is an accurate representation of the facts at the date of application.
- (B) I have read and understand Ordinance of the city code pertaining to the licensing and inspection of rental dwellings.
- (C) I irrevocably consent to the city and its inspector's entry upon any and all portions of the licensed rental dwelling for purposes of making the inspections required and/or permitted under this ordinance, including the right to inspect individual dwelling units.
- (D) I irrevocably consent and agree to pay all enforcement costs provided for by Chapter 9, Article XV, Section 9-316 of the City Code pertaining to the Licensing of Rental Dwellings

(Signature of Legal Title Holder)

Please sign your name clearly on the first line and print your name clearly on the second line.

Signature: _____ Date: _____

Print Name Here: _____