

**Surrey Township
Building & Rental Inspection Department
110 E. Michigan Street P.O. Box 647
Farwell, Michigan 48622**

APPLICATION FOR RENTAL INSPECTION

New Inspection Inspection Renewal Change in Owner/Agent

1. OWNER INFORMATION

Name: _____

Mailing Address: _____

Phone Numbers: _____ Day _____ Cell _____

2. AGENT/PROPERTY MANAGEMENT INFORMATION

Name: _____

Mailing Address: _____

Phone Numbers: Day _____ Cell _____

EMERGENCY: _____ Email _____

3. RENTAL PROPERTY INFORMATION

Property Address: _____

Parcel Tax ID Number: 18-014- _____ - _____ - _____

SINGLE-FAMILY DUPLEX (two-family) 3 or MORE UNITS HOTEL/MOTEL

IF MULTI UNIT BUILDING -- COMPLETE THE FOLLOWING:

1. How many buildings in the complex? _____
2. How many units in each building? _____
3. Are any unit's owner occupied? _____

APPLICATION AFFIDAVIT:

I hereby attest to the truth and accuracy of the information contained in this application and grant the Surrey Township permission to conduct any and all inspections required and affirm that all tenant of the subject property will be informed and required and scheduled inspections. I acknowledge that it is my responsibility to schedule an appointment for a housing inspection and to complete all repairs necessary for the issuance of a Certificate of Compliance with the Surrey Township Rental Code; that it is my responsibility to schedule any necessary re-inspections and/or future certification renewal inspections prior to expiration of the Certificate of Compliance; and that I have read the Information for Rental Registration form.

SIGNATURE: _____ DATE: _____

PRINT NAME: _____ DATE: _____