

RENTAL REGISTRATION

<ul style="list-style-type: none"> \$25 per unit biannually. A late fee of an additional \$25 per unit will be applied if Registration was not received by January 31st for that rental period (\$50 per unit if late). Registrations must be renewed bi-annually and are non-transferable. New owners must apply for their own Registration. Rental Registration Exemption is required to be applied for biannually, but no fee is due. 	OFFICE USE ONLY Amt Pd: _____ Date submitted: _____ Entered into PW: _____ Entered into LF: _____
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<ul style="list-style-type: none"> Rental Registration is biannual and due for renewal by January 31 on even numbered years, or an additional late fee will be assessed. <ul style="list-style-type: none"> 2022-2023 Rental Period, due 1/31/2022 2024-2025 Rental Period, due 1/31/2024 2026-2027 Rental Period, due 1/31/2026 If your property has a tax classification of non-homesteaded, then you will be expected to apply for Rental Registration or exemption. If you need to homestead your property: <ul style="list-style-type: none"> Notify Isanti County Assessors Department (763-689-2752), and notify city staff (763-552-3257) so we do not pursue enforcement. 	<ul style="list-style-type: none"> Mail completed forms & fee (if applicable) to: City Hall, ATTN: Rental, 300 3rd Ave NE, Cambridge, MN 55008. In-person drop offs M-F 8-4:30 accepted at City Hall, or after-hours at our drop box in front of City Hall. Email completed form(s) to building@ci.cambridge.mn.us and staff will call for credit card payment. Please note that there is a credit card convenience fee.
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RENTAL PROPERTY INFORMATION

Building Name (if applies): _____ Street Address: _____ Number of Units: _____	Is a criminal background check completed on each and every residential tenant? <input type="checkbox"/> Yes <input type="checkbox"/> No Does a written lease exist for each and every residential property and unit dwelling thereon? <input type="checkbox"/> Yes <input type="checkbox"/> No Does a written lease addendum commonly known as a "Drug Free/Crime Free Lease Addendum" exist for each and every written lease? <input type="checkbox"/> Yes <input type="checkbox"/> No
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RENTAL TYPE <input type="checkbox"/> Single Family House with 1 family <input type="checkbox"/> Single Family House with <4 unrelated people <input type="checkbox"/> Duplex, Triplex, or Fourplex <input type="checkbox"/> Townhouse or Rowhouse <input type="checkbox"/> Tenant above commercial unit <input type="checkbox"/> Apartment <input type="checkbox"/> Condo (Unit individually owned)	EXEMPT RENTAL PROPERTIES <i>Rental Exemption must be submitted biannually for exempt rental properties (see reverse side).</i>
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RENTAL MANAGER (IF APPLICABLE)

Company (if applies): _____ Contact Person (if company): _____
 Property Owner _____
 Address _____ City _____ State _____ Zip _____
 Phone _____ Email _____

PROPERTY OWNER INFORMATION (FEE OWNER OF THE PROPERTY)

Company (if applies): _____ Contact Person (if company): _____
 Property Owner _____
 Address _____ City _____ State _____ Zip _____
 Phone _____ Email _____

PROPERTY OWNER SIGNATURE & ACKNOWLEDGEMENT (UNSIGNED FORMS WILL BE RETURNED)

Tennessee Notice: Some or all information you are asked to provide is classified by State law as either private, public, or confidential. The data will constitute a public record if and when the registration is granted. Our purpose and intended use of this information is to annually update our records and records of other governmental agencies required by law. If you refuse to supply the information, the registration may not be issued.

I certify the information contained in this form is true to the best of my knowledge; that I have read and understand the conditions under which my rental registration, if not exempt, may be suspended or revoked; and that the rental property being registered complies with applicable codes and ordinances. I hereby agree to notify the City within 30 days of any changes in ownership or type of occupancy.

Printed Name _____ Signature _____ Date _____

RENTAL EXEMPTION

<ul style="list-style-type: none"> • Rental Registration Exemption is required to be applied for biannually, but no fee is due. 	OFFICE USE ONLY Amt Pd: _____ Date submitted: _____ Entered into PW: _____ Entered into LF: _____
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<ul style="list-style-type: none"> • Rental Registration is biannual and due for renewal by January 31 on even numbered years, or an additional late fee will be assessed. <ul style="list-style-type: none"> • 2022-2023 Rental Period, due 1/31/2022 • 2024-2025 Rental Period, due 1/31/2024 • 2026-2027 Rental Period, due 1/31/2026 • If your property has a tax classification of non-homesteaded, then you will be expected to apply for Rental Registration or exemption. <ul style="list-style-type: none"> • If you need to homestead your property: <ul style="list-style-type: none"> • Notify Isanti County Assessors Department (763-689-2752), • and notify city staff (763-552-3257) so we do not pursue enforcement. 	<ul style="list-style-type: none"> • Mail completed forms & fee (if applicable) to: City Hall, ATTN: Rental, 300 3rd Ave NE, Cambridge, MN 55008. • In-person drop offs M-F 8-4:30 accepted at City Hall, or after-hours at our drop box in front of City Hall. • Email completed form(s) to building@ci.cambridge.mn.us and staff will call for credit card payment. Please note that there is a credit card convenience fee.
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PROPERTY INFORMATION

Building Name (if applies): _____ Street Address: _____ Number of Units: _____	<p>EXEMPT RENTAL PROPERTIES <i>Rental Exemption must be submitted biannually for exempt rental properties</i></p> <p><input type="checkbox"/> Exemption – family occupied (All renters residing in the rental property are related to me as a parent, child, sibling, grandparent, grandchild, step-parent, step-child, step-grandparent, or step-grandchild)</p> <p><input type="checkbox"/> Exemption – owner occupied with <2 renters (I, or my family occupies the property and two or less tenants share all living spaces within the dwelling and I certify there is no separate access or living facilities.)</p> <p><input type="checkbox"/> Exemption – state licensed (rest home, assisted living facility, convalescent care facility, licensed group home, housing with Services, or nursing home) (must submit copy of state license)</p> <p><input type="checkbox"/> Exemption – 2nd home</p> <p><input type="checkbox"/> Exemption – Not Currently Renting, but it is a rental property</p> <p><input type="checkbox"/> Exemption – Contract for Deed</p>
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Further description of exemption (if needed):

PROPERTY OWNER SIGNATURE & ACKNOWLEDGEMENT (UNSIGNED FORMS WILL BE RETURNED)

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I certify the information contained in this form is true to the best of my knowledge; that I have read and understand the conditions under which my property is exempt from rental registration. I hereby agree to notify the City within 30 days of any changes in ownership or type of occupancy/rental.

_____	_____	_____
Printed Name	Signature	Date