



**THE CITY OF MAYFIELD HEIGHTS ~ BUILDING DEPT.**

6154 Mayfield Road - Mayfield Heights, Ohio 44124-3296

Phone: 440/442-2626 Fax: 440/442-7662

***HOUSING LICENSE APPLICATION-2019***

(please print or type)

**LICENSE FEE: \$50.00**

**STREET ADDRESS:** \_\_\_\_\_

**OWNER OF RECORD:** \_\_\_\_\_

Owner Address: (no PO Boxes): \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Email address: \_\_\_\_\_

Agent Name: \_\_\_\_\_ Phone: \_\_\_\_\_

**1341.011; Housing License** No person shall let, rent, lease, conduct, operate, occupy, maintain or own any building or portion of any building, in which there is one or more rental dwelling units or in which a rooming house is operated, or own any interest therein, unless a housing license, as provided in this chapter, has been applied for, issued, and is in force.

Signature of Owner or Agent: \_\_\_\_\_

Type or Print Name: \_\_\_\_\_

Date of Signature: \_\_\_\_\_

Any questions may be directed to Gregory Fort, Building Inspector at 440-442-2626, Ext. 281.

**Application is due by January 1, 2019 - \$25.00 late charge after February 1, 2019**

Inspection appointment date \_\_\_\_\_ time \_\_\_\_\_ not required this year \_\_\_\_\_

Please fill out tenant information on the back of this form.

# Tenant Information Worksheet

All submitted information must be typed or printed. If a unit is vacant, indicate so on tenant name space. Make additional copies as needed.

Bedrooms \_\_\_\_\_ # Adults \_\_\_\_\_ # Children \_\_\_\_\_

Names and Phone Numbers of Adults (for emergency contact only)

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Names of Children

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