



Department of Public Works
Code Enforcement Division

3715 Wells Avenue, Mount Rainier, Maryland 20712
Telephone (301) 985-6551 Facsimile: (301) 779-4485

Rental Property License Application
(FOR STRUCTURES WITH 3 OR LESS DWELLING UNITS)

Filing Fee* _____ Date Paid _____ Check No. _____

*A late charge may be assessed if an application is not received within 30 days of the renewal notice.

Address of Rental Property _____

Property Owner _____

Property Owner's Address _____

Address at which you agree to accept notice from the city if different from above: _____

Daytime Telephone No. _____ Evening Telephone No. _____

The City requires that you provide updated information should your address change.

Do you have someone else managing this property for you? Yes ___ No ___

If yes, please provide name, mailing address, day and evening telephone numbers below.

Information regarding the rental property

Number of total persons authorized by owner to occupy building: _____

How many rental units are in your building? _____ Is there more than one (1) kitchen? _____ If so, how many? _____

How many bedrooms? _____ Are any located in basement? _____ If so, how many? _____

Is this rental property or any units in this rental property alarmed? _____ Which Unit(s) _____

I have carefully examined and read the above application and hereby swear or affirm all information is true and correct, and that in renting these dwelling units all provisions of the city of Mount Rainier's Ordinances, Prince George's County Ordinances, and State Laws will be complied with whether herein specified or not. By making this application, I am granting permission to the city to make inspection(s) of the rental property described herein for the purpose of determining compliance with the city of Mount Rainier Code Chapter 3A, Standards for Property Maintenance, and Chapter 7, Licenses and Permits.

Signature of Owner or Authorized Agent

DO NOT WRITE BELOW THIS LINE

License Fee: _____ Rental License No: _____ 1st Inspection Date _____

Penalty Fee: _____ Expiration Date: _____ 2nd Inspection Date _____

Re-inspection Fee: (1) _____ 3rd Inspection Date _____

Total License Fee: _____ Inspector's Name _____

(1) A \$25.00 fee will be assessed for each reinspection after the first two inspections

Date Approved _____

