



**CITY OF LANCASTER**  
**RENTAL REGISTRATION APPLICATION**  
 PLEASE PRINT CLEARLY



**Building Inspection**

Contractor Type: \_\_\_\_\_ Date : \_\_\_\_\_

- |   |   |  |
|---|---|--|
| <input type="checkbox"/> Apartment Complex (\$15.00 per unit) | <input type="checkbox"/> Hotel/Motel (\$50.00 per unit) | <input type="checkbox"/> Single-Family Duplex Rental       |
| List number of units below                                    | List number of units below                              | <input type="checkbox"/> Change in Tenant (\$55.00 fee)    |
| _____ Units   | _____ Units   | <input type="checkbox"/> Annual registration (\$15.00 fee) |

**You must attach a copy of your current state Drivers License.**

**Company Name:** \_\_\_\_\_

**Owner/Officer/License Holder Name:** \_\_\_\_\_ **Title:** \_\_\_\_\_

Officer of the company is the President, Vice President, CEO, or Corporate Secretary. This person will be held responsible for seeing that all work being performed under this registration is completed and in compliance with the City codes and ordinances. If a license is required, the licensed person's information must be used.

**Address:** \_\_\_\_\_ **City** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip:** \_\_\_\_\_

**Office Number:** \_\_\_\_\_ **Fax:** \_\_\_\_\_ **Cell:** \_\_\_\_\_

**Email Address:** \_\_\_\_\_

**Property Manager:** \_\_\_\_\_

**City:** \_\_\_\_\_ **Zip:** \_\_\_\_\_ **Phone:** \_\_\_\_\_

**Email Address:** \_\_\_\_\_

Any changes to the owner, property/resident manager or lender are required to be submitted to the Building Official Within ten (10) days of any change in ownership, lender or management. Note: A name change or change of ownership requires an inspection by a Building Inspector before the utilities can be released.

**This form must be notarized if any other person is registering for you or if you are registering by mail. If registering by mail, you must include a self-addressed stamped envelope to receive a receipt of payment by return mail. Registration is valid for a period of one year from the date of registration. REGISTRATION FEES ARE \$50.00 PER LICENSE/REGISTRATION BEING REGISTERED (except for plumbing, electrical, propane, fire alarm and fire sprinkler contractors which are not charged a registration fee). RENEWAL NOTICES WILL BE EMAILED ONLY IF AN EMAIL ADDRESS IS PROVIDED. NO OTHER NOTICES WILL BE PROVIDED.**

The State of Texas  
 County of \_\_\_\_\_ §

BEFORE ME, the undersigned authority, on this day personally appeared \_\_\_\_\_ known to me to be the person whose name is subscribed to the foregoing instrument and, being by me the first duly sworn, upon oath declared that the statements and capacity acted in are true and correct.

\_\_\_\_\_  
**Signature** **Title**

Subscribed and sworn to before me, this \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_\_\_ A.D. to certify which witness.

\_\_\_\_\_  
**Notary Public - Signature**