



CITY OF LANCASTER
RENTAL REGISTRATION APPLICATION
PLEASE PRINT CLEARLY



Building Inspection

Date : _____

[] Change in Tenant (\$55.00 fee) [] Annual registration (\$15.00 fee)

Property Address: _____ Lock Box Code: _____

Is property occupied? _____ Is water service active? _____ Water service must be active to perform inspection

Inspection Date Requested: _____ or call (972) 227-2994 to schedule an inspection

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: _____

Signature _____ Title _____

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