



CITY OF WEST FRANKFORT

Non-Owner (Rental) Registration and Designation of Agent

OWNER INFORMATION

Please Print

Company Name (If applicable) _____

Owner(s) Name: Last _____ First _____ Middle Initial _____

Mailing Address: Street _____ City _____ State _____ Zip Code _____

Telephone: Home (_____) _____ Work (_____) _____ Cell (_____) _____

Driver's License Number and Issuing State: _____ State _____ Date of Birth ____/____/____

The undersigned owner affirms under penalty of perjury that the information herein is correct and hereby designates himself/herself or the party listed below as the Agent to receive notices concerning the listed property(ies). The Agent is also authorized to grant the City of West Frankfort access to the interior and exterior of the listed property(ies) for the purpose of conducting housing inspections pursuant to the West Frankfort Housing Code for Non-owner Occupied Dwellings.

The undersigned states that the above is the Owner or one of the Owners and has authority to make this Registration of the real estate listed on attached Property Information Sheet and that on said real estate is a non-owner occupied rental dwelling, or a non-owner occupied dwelling unit as defined in the Ordinance No. TJ-2-____, Housing Code for Non-Owner Occupied Dwellings. **A copy of the most recent deed and most recent tax bill are attached hereto as Exhibits 1 and 2.**

Owner's Signature _____ Date _____

Owner or officer of LLC or corporation

AGENT INFORMATION

Please Print

Note: Individual property owners who reside in Franklin County: Hamilton, Jackson, Perry, Saline, and Williamson County may designate themselves as Agent. All other owners must designate as an Agent a person who resides in one of the above listed counties.

Agent's Name: Last _____ First _____ Middle Initial _____

Home Address: Street _____ City _____ State _____ Zip Code _____

Work Address: Street _____ City _____ State _____ Zip Code _____

Telephone: Home (_____) _____ Work (_____) _____ Cell (_____) _____

Driver's License Number and Issuing State: _____ State _____ Date of Birth ____/____/____

The undersigned acknowledges under penalty of perjury that he/she is the agent for the above Owner for the herein listed property(ies) and agrees to accept notices from the City concerning the listed property(ies) and to grant the City of West Frankfort access to the interior and exterior of the listed property(ies) upon reasonable notice as stated in the Housing Code for the purpose of conducting housing inspections pursuant to the West Frankfort Housing Code for Non-owner Occupied Dwellings.

Agent's Signature _____ Date _____

PROPERTY INFORMATION

Please Print

| Address | Number of Dwelling Units | *Type of Dwelling(s) (✓ all that applies) |
|---------|--------------------------|--|
| 1. | | H__ MH__ D__ A__ O__ |
| 2. | | H__ MH__ D__ A__ O__ |
| 3. | | H__ MH__ D__ A__ O__ |
| 4. | | H__ MH__ D__ A__ O__ |
| 5. | | H__ MH__ D__ A__ O__ |
| 6. | | H__ MH__ D__ A__ O__ |
| 7. | | H__ MH__ D__ A__ O__ |
| 8. | | H__ MH__ D__ A__ O__ |
| 9. | | H__ MH__ D__ A__ O__ |
| 10. | | H__ MH__ D__ A__ O__ |
| 11. | | H__ MH__ D__ A__ O__ |
| 12. | | H__ MH__ D__ A__ O__ |

***H** = House (Single Unit Dwelling) **MH** = Mobile Home **D** = Duplex **A** = Apartment **O** = Other (explain on reverse side)
 If more room is needed continue on next sheet.

Return to: CITY OF WEST FRANKFORT
 CODE OFFICER
 110 NORTH JEFFERSON STREET
 WEST FRANKFORT, IL 62896

Per Dwelling Unit = \$50

Multiple Dwelling Sharing Common Roof and Foundation
 2-10 dwelling units: \$40 per unit
 11-20 dwelling units: \$35 per unit
 21 and above dwelling units: \$30 per unit

For City Use Only

| | | |
|--------------------------------|--------------------------------|-----------------------|
| Date Received _____ | Number of Dwelling Units _____ | Amount Received _____ |
| Number of Multiple Units _____ | | |

PROPERTY INFORMATION

Please Print

| Address | Number of Dwelling Units | *Type of Dwelling(s) (✓ all that applies) |
|---------|--------------------------|--|
| 13. | | H__ MH__ D__ A__ O__ |
| 14. | | H__ MH__ D__ A__ O__ |
| 15. | | H__ MH__ D__ A__ O__ |
| 16. | | H__ MH__ D__ A__ O__ |
| 17. | | H__ MH__ D__ A__ O__ |
| 18. | | H__ MH__ D__ A__ O__ |
| 19. | | H__ MH__ D__ A__ O__ |
| 20. | | H__ MH__ D__ A__ O__ |
| 21. | | H__ MH__ D__ A__ O__ |
| 22. | | H__ MH__ D__ A__ O__ |
| 23. | | H__ MH__ D__ A__ O__ |
| 24. | | H__ MH__ D__ A__ O__ |
| 25. | | H__ MH__ D__ A__ O__ |
| 26. | | H__ MH__ D__ A__ O__ |
| 27. | | H__ MH__ D__ A__ O__ |
| 28. | | H__ MH__ D__ A__ O__ |
| 29. | | H__ MH__ D__ A__ O__ |
| 30. | | H__ MH__ D__ A__ O__ |
| 31. | | H__ MH__ D__ A__ O__ |
| 32. | | H__ MH__ D__ A__ O__ |
| 33. | | H__ MH__ D__ A__ O__ |

***H** = House (Single Unit Dwelling) **MH** = Mobile Home **D** = Duplex **A** = Apartment **O** = Other (explain on reverse side)

PROPERTY INFORMATION

Please Print

| Address | Number of Dwelling Units | *Type of Dwelling(s) (✓ all that applies) |
|---------|--------------------------|--|
| 34. | | H__ MH__ D__ A__ O__ |
| 35. | | H__ MH__ D__ A__ O__ |
| 36. | | H__ MH__ D__ A__ O__ |
| 37. | | H__ MH__ D__ A__ O__ |
| 38. | | H__ MH__ D__ A__ O__ |
| 39. | | H__ MH__ D__ A__ O__ |
| 40. | | H__ MH__ D__ A__ O__ |
| 41. | | H__ MH__ D__ A__ O__ |
| 42. | | H__ MH__ D__ A__ O__ |
| 43. | | H__ MH__ D__ A__ O__ |
| 44. | | H__ MH__ D__ A__ O__ |
| 45. | | H__ MH__ D__ A__ O__ |
| 46. | | H__ MH__ D__ A__ O__ |
| 47. | | H__ MH__ D__ A__ O__ |
| 48. | | H__ MH__ D__ A__ O__ |
| 49. | | H__ MH__ D__ A__ O__ |
| 50. | | H__ MH__ D__ A__ O__ |
| 51. | | H__ MH__ D__ A__ O__ |
| 52. | | H__ MH__ D__ A__ O__ |
| 53. | | H__ MH__ D__ A__ O__ |
| 54. | | H__ MH__ D__ A__ O__ |

*H = House (Single Unit Dwelling) MH = Mobile Home D = Duplex A = Apartment O = Other (explain on reverse side)