



CITY OF ANGLETON RESIDENTIAL RENTAL PROPERTY REGISTRATION FORM

Address of Rental Unit _____

Total Dwelling Square Footage (SF) _____ Number of Bedrooms _____

If an apartment complex or other multi-family unit, provide total number of rental units. _____

Please Select One: ☐ Annual Registration ☐ Change of Tenant

OWNER INFORMATION

Name _____

Address _____

Phone _____ Email _____

1) If owned by a partnership please list name, address and phone number of each partner **or**

2) If owned by a corporation, please list state/country of registration, mailing address, business location, phone number, individual in charge of office and names of all directors

PROPERTY MANAGER INFORMATION

Name _____

Address _____

Phone _____ Email _____

TENANT INFORMATION *Confirm tenant name matches UB records.*

Is the unit currently occupied? (Check One) Yes ☐ No ☐

If yes, please list the name of the primary tenant and the number of occupants below.

Name _____ # of Occupants _____

Signature *Please retain a copy for your records*

Date _____

Signature of Owner/Agent _____ Print Name _____

Registration fee is due upon submittal of registration application and inspection fee is due prior to scheduling your inspection. This application constitutes consent of the property owner/manager/agent for the City of Duncanville to perform all required interior and exterior inspections of this property. The signatory does hereby represent that all of the information is true and correct; any false information may result in withdrawal of the application and may result in criminal charges.

DWELLING TYPE	REGISTRATION	INSPECTION	UNITS
<input type="checkbox"/> Apartment	\$350	\$30/unit	_____
<input type="checkbox"/> Duplex	\$100	\$50	
<input type="checkbox"/> Town Home	\$100	\$50	
<input type="checkbox"/> Single-Family Home	\$100	\$50	

INSPECTION TYPE

- ☐ Annual
- ☐ Change of Tenant
- ☐ Re-Inspection (\$50)

DATE OF SCHEDULED INSPECTION: _____

TIME OF INSPECTION: _____

INSPECTOR: _____

TOTAL DUE: _____