



Rental Housing Application

Albert Lea Fire & Inspection Department
Albert Lea City Hall • 221 Clark St E • Albert Lea, MN 56007
Telephone: 507-377-4340 • Fax: 507-377-4336
www.city.albertlea.org

Rental License #:

Property Address:

Name of Property or Complex, if any:

Property Information

Type of Rental Property: <input type="checkbox"/> Single Family Dwelling <input type="checkbox"/> Twinhome/Duplex <input type="checkbox"/> Town Home <input type="checkbox"/> Multi-family dwellings:	Rental Information: <input type="checkbox"/> New License <input type="checkbox"/> Renew License <input type="checkbox"/> Change of Ownership
Total number of buildings: _____ Total number of units: _____	
# of _____ Efficiency units	
# of _____ One-bedroom units	
# of _____ Two-bedroom units	
# of _____ Three-bedroom units	
# of _____ Four-bedroom units	
<input type="checkbox"/> Other (Describe) _____	

Owner Information

Company Name:

Name(s):

Address:

City:	State:	Zip:
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Phone:	Cell Phone:
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E-mail:

Emergency Contact

If you live more than 60 miles from Albert Lea you must designate a local agent

Agent is: Owner Manager (Circle One)

Agent:

Address:

City:	State:	Zip:	Phone: <i>(24 hour contact)</i>
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Notice to Applicants:

- The Inspection Department must be notified in writing prior to any transfer of legal control. Please include the purchaser's name, address, telephone number and agent. The transferee must make an application to the City within 30 days of the transfer. Failure to complete application will result in the automatic forfeiture of the license.
- Every current license must be conspicuously posted in the main entryway or other approved location. Every license holder or their agent shall provide a copy of the current license to any tenant or prospective tenant.
- Copies of the Chapter 34 Housing Code, Rental Housing Licensing, Public Nuisances and Safe and Crime Free Rental Housing Program are available from the City and are posted on the City website at www.city.albertlea.org. Owners, agents and managers should be familiar with these provisions.

Property Inspections:

To schedule inspections or to obtain further information please contact the Inspection Department at 507-377-4340.

Applicant's Affidavit

- I understand that I will operate and maintain the subject premises identified herein according to the City of Albert Lea's code of ordinances Chapters 34 and 38 and the laws of the State of Minnesota. Agreement to allow inspection Article 1 Sec. 34 -6 and Article 11 Sec. 34-29.
- I certify that there are no delinquent property taxes for this dwelling unit.
- I certify that there are no delinquent utility bills for this dwelling unit.
- Furthermore, I certify that I am the owner or authorized agent and that the answers contained herein are true and accurate in all respects to the best of my knowledge and belief.

Applicant Signature _____ Date: _____

For Office Use Only:

City of Albert Lea Fire & Inspection Department

Inspection Date(s): _____ Inspector: _____

NOTES: _____

Date Received: _____ Date Issued: _____ Compliance Date: _____

Check #: _____ Date Paid: _____ Fee: _____