

CITY OF CLAWSON
BUILDING & PLANNING DEPARTMENT
425 N. MAIN ST., CLAWSON, MI 48017
248-435-4500, EXT. 121

Rental Application
07/01/14 – 06/30/16

Property Owner Name & Address:

Property Address:

Parcel Number:

Phone Number:

Certificate #:

Please be advised that any landlord engaged in the business of leasing dwellings shall apply for a Bi-Annual license (every two (2) years) – Clawson Code Art. II Sec. 18-61. Your property is listed as a rental property in city records. Please make any information corrections and return this with the application fee.

The building is no longer a rental as of this date: _____

The building is still a rental as of this date: _____

Owner/Representative(s) Signature: _____ Date: _____

Amount Due: \$

Number of Buildings:

Fee is \$40.00 Per Building

PLEASE NOTE:

Property Owner is the entity/individual ultimately responsible for payment of all fees.

All unpaid fees are assessed as a tax lien.

PLEASE RETURN ALL COMPLETED APPLICATION(S) WITH THE FEE TO:

City of Clawson, ATTN: Building Department/Fire

425 N. Main St.

Clawson, MI 48017

The Building Inspector will do the required inspections.

No appointment necessary (outside inspection only).

Please note this application is for 07/01/14 – 06/30/16 Rental Program.

James E. Albus, Director of Building & Planning