

**CITY OF AUBURN, AL
RESIDENTIAL/COMMERCIAL RENTAL REGISTRATION FORM**

FOR OFFICIAL USE ONLY
Customer # _____

OWNER/BUSINESS INFORMATION

Property Owner/Business Name: _____

Type of Ownership: Corporation Partnership Individual or Sole Proprietorship Limited Liability Partnership (LLP)
 Limited Liability Company (LLC) (Single Member) Limited Liability Company (LLC) (Multi-Member)

Federal Employer Identification # _____ OR Social Security # _____

ADDRESS/MAILING INFORMATION

Business Address: _____, _____ (City), _____ (State), _____ (Zip)
Is this a residential or commercial location? Residential Commercial

Business Phone # _____ Fax # _____ Website: _____

Mailing Address: _____, _____ (City), _____ (State), _____ (Zip)

RENTAL PROPERTY INFORMATION (Attach additional sheet(s) if necessary)

Note: Each property must be listed individually (i.e. each side of duplex or unit of condo listed separately)

1. Property Address: _____ Unit # _____
Property Type: House Duplex Condo Apartment Complex Commercial Property

- a. Date Property First Made Available for Rent/Lease: _____ Average/Estimated Monthly Rental Fee: _____
- b. Are you the owner of the property? Yes No
If no, provide the name/contact number of property owner: _____
- c. Are you the manager of the property? Yes No
If no, provide the name/contact number of the property manager: _____

2. Property Address: _____ Unit # _____
Property Type: House Duplex Condo Apartment Complex Commercial Property

- a. Date Property First Made Available for Rent/Lease: _____ Average/Estimated Monthly Rental Fee: _____
- b. Are you the owner of the property? Yes No
If no, provide the name/contact number of property owner: _____
- c. Are you the manager of the property? Yes No
If no, provide the name/contact number of the property manager: _____

3. Property Address: _____ Unit # _____
Property Type: House Duplex Condo Apartment Complex Commercial Property

- a. Date Property First Made Available for Rent/Lease: _____ Average/Estimated Monthly Rental Fee: _____
- b. Are you the owner of the property? Yes No
If no, provide the name/contact number of property owner: _____
- c. Are you the manager of the property? Yes No
If no, provide the name/contact number of the property manager: _____

OWNER/PARTNER/OFFICER INFORMATION (Person(s) legally responsible for business) *(Attach additional sheets if necessary)*

SECTION MUST BE COMPLETED BY ALL PERSONS LEGALLY RESPONSIBLE FOR BUSINESS

Name: _____ Title: _____

Home Address: _____, _____ (City), _____ (State), _____ (Zip)

Business Phone # _____ Alternative Phone # _____ Fax # _____ Email _____

SSN: _____ DOB: _____ DL#/STATE: _____

Please provide a legible copy of the driver's license or state-issued identification card for each owner/partner/officer.

CONTACT INFORMATION (Person who may answer tax/licensing questions about the business)

Name: _____ Title: _____

Business Phone # _____ Alternative Phone # _____ Fax # _____ Email _____

CITY OF AUBURN LICENSING REQUIREMENTS

- Owner/partner/officer section **must** be completed before a business license will be issued. Applicants may elect to provide either the social security number or driver's license number. One of the aforementioned **must** be provided before a business license will be issued.
- Registration form **must** be signed by the person(s) legally responsible for the business.

LICENSE FEES (FIRST YEAR)

- Residential
- Commercial

Start Date Jan 1st – Jun 30th

\$100 plus \$5 issuance fee
\$150 plus \$5 issuance fee

Start Date July 1st or Later

\$50 plus \$5 issuance fee
\$75 plus \$5 issuance fee

RENEWAL LICENSE FEES

- Residential: The greater of 1 ½ % (.015) of gross rental income received in previous year or \$100 plus \$5 issuance fee
- Commercial: The greater of 1/40 of 1% (.00250) of gross rental income received in previous year or \$100 plus \$5 issuance fee

Note1: If property owner/business rents/leases both residential and commercial property, a Residential Rental business license and Commercial Rental business license must be obtained.

Note2: All business licenses expire on Dec 31 and are renewable between Jan 1 – Feb 15. If renewed after Feb 15, a penalty of 15% of license fee will be assessed. Penalty will increase to 30% of renewed thirty (30) days after delinquent date of Feb 15 and interest of 1% shall be added each month thereafter.

PAYMENT OPTIONS: Cash, check, money order, or credit card (Visa/MasterCard ONLY by phone or in person)

STATEMENT OF DECLARATION

Under penalties of perjury, I declare that I have examined this form and to the best of my knowledge and belief, it is true, correct, and complete. My signature indicates that I am legally responsible for the business and assume all tax/licensing liabilities of this business that might occur.

Signature of the Person Legally Responsible for Business

Print Name of the Person Legally Responsible for Business

Date _____