CITY OF FARMINGTON

Planning & Building Department

Rental Registration Application (1 or 2 family)

RENTAL ADDRESS: _____ **Parcel #** _____

Single Family _____ **OR** **Duplex** _____

Fee Schedule:

Rental Registration Fee per building	$350.00
Triennial Inspection Fee/Change of Tenant Fee (requires reinspection) per unit	$200.00
Special Inspection Fee	$75.00
Late Fee (per unit/per month before inspection)	$25.00
Replacement Certificate of Compliance Fee	$10.00
Reschedule Fee (if appointment is cancelled less than 48 hours prior to appointment)	$10.00
Change of property management company fee	$150.00
Change an active registered vacant property to rental	$50.00
Tenant Verification – effective January 1, 2025	$25.00

All registration and inspection fees must be paid before inspection. Late Fee: Assessed annually after due date, at the close of business day. The undersigned hereby makes application for registration and certification of compliance, by the City of Farmington, Ordinance No _____ "Registration and Certification of Compliance" may be revoked in case of violation(s) and the enforcing officials shall be permitted to inspect said Rental Property as allowed by law.

POST OFFICE BOX's ARE NOT PERMITTED, YOU MUST USE YOUR STREET ADDRESS FOR REGISTRATION

This information is not for publication.

OWNER INFORMATION

Last Name_____ **First Name**_____

Owner's Address _____

Office Number_____

Cell Number _____

PROPERTY MANAGER INFORMATION (If Applicable)

Last Name _____ **First Name**_____

Manager's Address _____

Office Number_____

Cell Number_____

Email Address:_____

I affirm that all current property taxes, water/sewer bills, are current.

Signature_____ **Date**_____

Return to: City of Farmington – Planning & Building Department
33720 W. Nine Mile
Farmington, MI 48335
forms-permits-inspections@farmgov.com

INCOMPLETE FORMS WILL NOT BE PROCESSED

See other side

Property Address: _____

Tenant's Name: _____

Birthdate _____ Phone #_____

# of occupants: ____

IF Duplex

Tenant's Name: _____

Birthdate _____ Phone #_____

# of occupants: ____