



1840 Municipal Drive, Lancaster PA 17601-4105
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Rental Housing License # _____

RENTAL HOUSING LICENSE APPLICATION

"I hereby certify by signing this application that I am the owner and/or authorized agent of said property; and to the best of my knowledge, all provided information herein is complete, accurate and true. Failure to maintain a current and valid Rental Housing License shall result in formal legal action filed against the property owner. A Rental Housing License does not deem the rental dwelling habitable or code compliant. It is the property owner's responsibility to ensure that a valid, two-signature Certificate of Use and Occupancy exists for or has been issued for said property. The rental housing program does not result in or verify the existence of a valid Certificate of Use and Occupancy."

**Signature of Property Owner or Authorized Agent's
 (License Applicant)**

Printed Name of Property Owner or Authorized Agent

Date

"The property owner and/or authorized agent acknowledge the obligation to provide a fit and habitable rental dwelling and hereby acknowledge that no life safety hazards (structural, fire, electrical, etc.) exist at the time of this application and that all life/safety equipment (smoke detectors, carbon monoxide detectors and fire extinguishers, etc.) for the rental dwelling is present and in proper operating condition."

Initials of Property Owner or Authorized Agent's _____ Date _____

Rental Property Address / Address Range for Multi-Unit Building: _____

Rental Property Building Name (if applicable) : _____ **One Rental License per Multi-Unit Apartment Building**

Single Family Dwelling Two-Family Dwelling Townhouse Dwelling (3 or more side-by-side units)

___ Apartment / Number of Units: _____ Boarding House/Congregate Living Facility / Number of Units: _____

Property Owner

Name: _____ Work #: _____ ext. _____
 Address: _____ Cell #: _____
 City: _____ State: _____ Zip: _____ e-mail: _____

Responsible Local Agent

Name: _____ Work #: _____ ext. _____
 Address: _____ Cell #: _____
 City: _____ State: _____ Zip: _____ e-mail: _____

(If the property owner resides more than 25 miles from the property, a *Responsible Local Agent* who resides within 25 miles of the property and is at least 21 years old **MUST** be indicated on the attached **Responsible Local Agent Consent Form**. The signed consent of the *Responsible Local Agent* is required, or the Rental Housing License Application will be denied.)

FOR OFFICE USE ONLY

ZONING OFFICE USE ONLY (Initial Application Only) _____ Application Approved _____ Application Denied

Zoning Review By: _____ Zoning Approval Date: _____ Zoning Denial Date: _____

Parcel #: _____ Zoning District: _____

Zoning Classification / Land Use: _____

Zoning Comments: _____

CODE OFFICE USE ONLY _____ Application Approved _____ Application Denied License Fee: _____ Inspection Fee: _____

Code Review By: _____ Code Approval Date: _____ Code Denial Date: _____

Building Code Classification: ___ Single Family Dwelling ___ Two-Family Dwelling ___ Townhouse Dwelling Unit

___ R-2 Multi-Family (Apartment, Boarding, Congregate Living) ___ R-3 Multi-Family (Boarding or Congregate <16 occupants)

Code Comments: _____