



# City of North Liberty Rental Permit Application



<http://northlibertyiowa.org/>

Submit form to PO Box 77 North Liberty, IA, 52317 or email [tconklin@northlibertyiowa.org](mailto:tconklin@northlibertyiowa.org)

Rental Building Address: \_\_\_\_\_

Rental Unit Label(s): \_\_\_\_\_

Number of units you own in building: \_\_\_\_\_ Total number of units in building: \_\_\_\_\_

### Applicant's Information:

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Email: \_\_\_\_\_ Phone # \_\_\_\_\_

### Property Owner's Information:

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Email: \_\_\_\_\_ Phone # \_\_\_\_\_

**ALL OUT OF TOWN OWNERS MUST PROVIDE LOCAL CONTACT PERSON OR MANAGEMENT COMPANY  
(Over 50 Miles)**

Manager's Name: \_\_\_\_\_

Address: \_\_\_\_\_

Email: \_\_\_\_\_ Phone # \_\_\_\_\_

**ALL CONDOS MUST PROVIDE CONDO ASSOCIATION NAME AND CONTACT INFO FOR ASSOCIATION**

Condo Association: \_\_\_\_\_

Address: \_\_\_\_\_

Email: \_\_\_\_\_ Phone # \_\_\_\_\_

## Fees schedule:

Certificate of Structure Compliance (one Time Fee):	\$50/Building	\$ _____
Annual Rental Permit Fee: (first unit):	\$50/Building	\$ _____
Annual Rental Fee: (each additional unit)	_____ x \$12/unit	\$ _____
	<b>TOTAL</b>	\$ _____

For office use only	
Permit Fee Paid _____	For Calendar year _____
Approval Date _____	New _____ Renewal _____
Permit # _____	Received by _____ Date _____
	Entered by _____ Date _____