



1330 College Street ♦ P.O. Box 538 ♦ Newberry, SC 29108
 PH. (803) 321-1019 ♦ FAX (803) 321-1003
<http://www.cityofnewberry.com>

RENTAL HOUSING REGISTRATION FORM

FOR CITY OF NEWBERRY USE ONLY

Reg. No. _____ **Sub'l Date:** _____ **Entry Date:** _____ **Initial** _____

FOLLOWING TO BE COMPLETED BY PROPERTY OWNER OR DESIGNATED PERSON/FIRM/CORPORATION

Property Owner (s) Name(s): _____

Mailing Address: _____ **City:** _____

State: _____ **Zip Code:** _____ **E-mail:** _____

Ph.: _____ **Cell:** _____ **FAX:** _____

Responsible Local Agent: _____

Mailing Address: _____ **City:** _____

State: _____ **Zip Code:** _____ **E-mail:** _____

Ph.: _____ **Cell:** _____ **FAX:** _____

(Please attach a notarized original Limited Power of Attorney form naming the Responsible Local Agent.)

Lien Holder (unit or property): _____ **Address** _____

_____ **Ph.:** _____ **Cell:** _____

Total No. of Properties to Register: _____ **Total No. of Units:** _____ **Bus. Lic. #** _____

Property No. 1

Rental Property Street Address : _____

Tax Map No.: _____ **No. of Units at This Address:** _____

Type of Units (Single family, duplex, triplex, mobile home, mobile home lot, condo, accessory apt., etc.): _____

I acknowledge that I am aware of the City codes that apply to the listed property(ies) and will maintain the property(ies) in accordance with all applicable regulations.

Signature of Owner/Local Responsible Agent: _____

RENTAL HOUSING REGISTRATION FORM
-ADDITIONAL PROPERTIES-
(TO BE ATTACHED TO COVER/FIRST PAGE)

Registration No. _____ **Entry Date:** _____ **Initial** _____

TO BE COMPLETED BY PROPERTY OWNER OR DESIGNATED AGENT/FIRM/CORPORATION

Property Owner(s)/Agent's Name(s): _____

Property No. _____

Rental Property Street Address : _____

Tax Map No.: _____ **No. of Units at This Address:** _____

Type of Units (Single family, duplex, mobile home, mobile home lot, condo, accessory apt., etc.): _____

Lien Holder (unit or property): _____ **Address** _____

_____ **Ph.:** _____ **Cell:** _____

Property No. _____

Rental Property Street Address : _____

Tax Map No.: _____ **No. of Units at This Address:** _____

Type of Units (Single family, duplex, mobile home, mobile home lot, condo, accessory apt., etc.): _____

Lien Holder (unit or property): _____ **Address** _____

_____ **Ph.:** _____ **Cell:** _____

Property No. _____

Rental Property Street Address : _____

Tax Map No.: _____ **No. of Units at This Address:** _____

Type of Units (Single family, duplex, mobile home, mobile home lot, condo, accessory apt., etc.): _____

Lien Holder (unit or property): _____ **Address** _____

_____ **Ph.:** _____ **Cell:** _____