# Village of Marcellus

6 Slocombe Avenue, Marcellus, NY 13108

www.villageofmarcellus.com ● (315) 673-3112 ● codes@villageofmarcellus.com

## Rental Property Registration

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### Instructions

**All rented dwelling units shall be registered and obtain a certificate of compliance every 36 months.**

- Section A: Provide the property address, total number of dwelling units and owner information.

- Section B: Indicate how many of the dwelling units will be occupied by the owner and/or vacant for the next 36 months.

- Section C: Indicate how many of the dwelling units will be rented in the next 36 months and calculate the fee.

- Section D: Sign and return this completed form with any applicable registration fee within 30 days.

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*This form is to be completed by the property owner, or their respective agent.*
***(Complete one form for each separate property.)***

**A. Property Information:**

Property address: _____  Total number of dwelling units: _____

Owner name: _____  Phone: _____

Owner address: _____

**B. Owner Occupied and Vacant Dwelling Units:**

Number of dwelling units occupied by the owner of the property for the next 36 months: _____

Number of dwelling units that will remain vacant for the next 36 months: _____

**C. Rented Dwelling Units and Fee:** (Payable to the Village of Marcellus)

Number of dwelling units that are or will be rented in the next 36 months: _____  x  $25 each = $_____  Fee

Name, phone number and email address of the contact person(s) with whom the fire inspection will be performed:

_____

_____

**D. Certification:**

*I hereby certify under penalty of perjury that the property located at the address indicated above in the Village of Marcellus, New York contains owner-occupied, vacant and/or rented dwelling units as indicated above. I also understand that, in the event I decide to rent any presently owner-occupied or vacant dwelling unit, the dwelling unit must be registered and a certificate of compliance obtained prior to its occupancy.*

**Owner/Agent Signature:** _____  **Date:** _____

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**Please return this registration and any applicable fee within 30 days to:**

Village of Marcellus, 6 Slocombe Avenue, Marcellus, NY 13108

**Upon submission of this registration please contact the Village of Marcellus Code Enforcement Office
by phone or email to schedule a certificate of compliance inspection.**

Office Use: _____  □ E

_____  □ M

□ F