



City of Clearwater
605 Cty Rd 75 NW
Clearwater, MN, 55320
Phone: 320-558-2428
www.clearwatercity.com

Permit # _____

Fee: \$75.00

RENTAL HOUSING REGISTRATION FORM

Property Owner Information

Is this a new registration or renewal? **New** **Renewal**

Rental Property Address: _____

Single

Duplex/Twin Home Unit Numbers: _____

Apartment Building Unit Numbers: _____

Other: _____

Owner(s) Name: _____

Owner(s)Address: _____

Owner(s) Phone Number: _____ **Email:** _____

Is the property owned by a business: Yes No

If yes, select business type:

Sole Proprietor Partnership Corporation LLC Other: _____

Business Name: _____

Business Address: _____

Business Phone Number: _____ **Contact Person:** _____

Legal Process

Please provide the contact information for the agent assigned to accept service of process and to receive or give receipt for notices related to the city's rental housing ordinance

Agent Name: _____

Agent Address: _____

Agent Phone Number: _____

Maintenance/Onsite Management

Please provide the contact information for the property manager or maintenance contact for the property

Name: _____

Title: _____

Address: _____

Phone Number: _____ Email: _____

Rights and Responsibilities published by the Minnesota Attorney General's Office is available by visiting: [Landlords and Tenants](#). To request an alternative format, please contact: Minnesota Attorney General's Office at (800) 657-3787, or through the Minnesota Relay Service at (800) 627-3529.

I hereby certify that the information on this form is true and accurate. I affirm that the property is in compliance with the City Code. I acknowledge that I was directed to review the provisions of the Rental Ordinance found in Chapter 8 of the City Code, which may be viewed on the city's website.

Property Owner/ Authorized Agent Signature

Date

Please submit completed forms and payments to City Hall:

Email to kgramsey@clearwatercity.com or

Mail to PO Box 9, Clearwater, MN 55320 or

In person at 605 Cty Rd 75 NW, Clearwater MN 55320 or drop box in rear parking lot

FOR CITY USE ONLY

Is the registration form filled out completely: Yes No

Does the property have any active code violations: Yes No

Registration Fee Amount: _____ Date Paid: _____

Paid by: Cash Check # _____ Credit/Debit Card

Certificate Issued: _____

Certificate Denied: _____

Reason for Denial: _____