

# Rental Registration Application

You must submit a separate registration form for each building



City of Cortland  
Fire Department  
Code Enforcement

Pursuant to the City of Cortland Rental Housing Law, the owner of each building containing one or more residential rental units shall complete this form and register the building with the City Code Enforcement Office.

Permits will be issued for any residential rental dwelling subject to the Rental Permit Law upon the owner making application and certifying under oath and subject to perjury that said dwelling is in compliance with all applicable City and State Codes, Statutes, Laws, Ordinances and regulations. At the request of and with the consent of the owner, the Code Enforcement Officer shall inspect the property for compliance prior to the issuance of a permit.

The applicant is advised that, in addition to any other remedies available under the law, any owner of a property which contains a building with one or more residential rental dwelling units who fails to comply with the minimum requirements of the City of Cortland Rental Housing Law, must comply by applying for and obtaining a Rental Permit pursuant to the City of Cortland Rental Housing Law, and given probable cause are subject to revocation or nonrenewal. Furthermore, the owner shall also be subject to all penalties set forth in said City of Cortland Rental Housing Law.

Post Office Boxes shall not be accepted as a physical address. There is space provided below for the mailing address. The building intended to be registered shall not be utilized as the owner's or agent's address unless it is the principal place of business or residence of the owner or agent.

<b>Office Use Only:</b>	Parcel Identification Number: _____
Date Application Received: _____	Temporary Rental Permit #: _____
_____ Inspection Date: _____	Inspected By: _____
Rental Permit Approved: <input type="checkbox"/> Yes <input type="checkbox"/> No	
If Yes, Rental Permit Number: _____ Rental Permit NOT Approved Details: _____	
Rental Permit Valid Until: _____	
Pre-existing Non-Conforming Use: ____ Existing CZO (if so what year): ____	
Traditional Family: _____ OR; Functional Family: _____	
Vacant Building: _____	

Physical Address of Rental Property: \_\_\_\_\_

Tax Map ID #: \_\_\_\_\_

Type of Application:  New  
 Change in Property, Owner or Agent  
 Renewal

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

Required Owner Information

Property Owner Name(s): \_\_\_\_\_

Type of Owner:

- Individual                       Partnership                       Limited Liability Partnership
- Joint Tenancy    Tenancy in Common    Tenancy by Entirety    Association
- Corporation    Limited Liability Company
- Other: \_\_\_\_\_

\*\* Please note: if you checked any box other than individual above, you will need to complete page 5 of this registration.

Owner Physical Address: \_\_\_\_\_ NO PO BOXES

City/State/Zip: \_\_\_\_\_ Email

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

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_

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

If you do not live in Cortland County or one of the 7 contiguous counties, a local agent/contact is required.

Agent/Local Contact Name(s): \_\_\_\_\_

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

City/State/Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_ Cell

Phone: \_\_\_\_\_

All official correspondence (Notices, Violation Notices, Invoices, Etc.) will be mailed to the address of record provided to the City of Cortland Assessors Office. Please be advised that if this information changes, it is your responsibility to contact our office to file a new Rental Registration Application.

Rental Property Information

Each building will need a separate application

Number of Rental Buildings on Parcel: \_\_\_\_\_

Number of Rental Units per Building: \_\_\_\_\_

Number of Total Units by Stories: \_\_\_ 1<sup>st</sup> Floor \_\_\_ 2<sup>nd</sup> Floor \_\_\_ 3<sup>rd</sup> Floor Is

there a basement? \_If yes, is there habitable / living space?

Is there an attic? \_If yes, is there habitable / living space?

Is there a functioning fire/smoke detection system? \_\_\_ Manual \_\_\_ Auto \_\_\_ Is

there working single station smoke and or Carbon Monoxide Detectors? \_\_\_

Is there a sprinkler system in the building? \_\_\_ Date of Last Inspection \_\_\_\_\_

Are there accessory buildings? Yes \_\_\_ No \_\_\_ If yes, please describe # \_\_\_ Car garage; \_\_\_ Shed

\_\_\_ Other (describe) \_\_\_\_\_ Number of Parking spaces \_\_\_\_\_

The following questions are pertinent to each specific rental dwelling unit: (if there are more units, add additional sheets as needed)

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

\*Please note: Maximum Number of Tenants Allowed refers to tenants not acting as a traditional or functional family as defined in City Code **§ 300-2: Family**

Apt/Room Identifier (letter/number) of Rental Unit: \_\_\_\_\_  
Is this Unit Vacant or Occupied? \_\_\_\_\_  
Square Footage of Habitable Space in this Unit: \_\_\_\_\_  
Maximum Number of Tenants Allowed\* \_\_\_\_\_  
Traditional or functional family (If applicable) \_\_\_\_\_  
Written Lease or Oral Lease: \_\_\_\_\_

Apt/Room Identifier (letter/number) of Rental Unit: \_\_\_\_\_  
Is this Unit Vacant or Occupied? \_\_\_\_\_  
Square Footage of Habitable Space in this Unit: \_\_\_\_\_  
Maximum Number of Tenants Allowed\* \_\_\_\_\_  
Traditional or functional family (If applicable) \_\_\_\_\_  
Written Lease or Oral Lease: \_\_\_\_\_

Apt/Room Identifier (letter/number) of Rental Unit: \_\_\_\_\_  
Is this Unit Vacant or Occupied? \_\_\_\_\_  
Square Footage of Habitable Space in this Unit: \_\_\_\_\_  
Maximum Number of Tenants Allowed\* \_\_\_\_\_  
Traditional or functional family (If applicable) \_\_\_\_\_  
Written Lease or Oral Lease: \_\_\_\_\_

Apt/Room Identifier (letter/number) of Rental Unit: \_\_\_\_\_  
Is this Unit Vacant or Occupied? \_\_\_\_\_  
Square Footage of Habitable Space in this Unit: \_\_\_\_\_  
Maximum Number of Tenants Allowed\* \_\_\_\_\_  
Traditional or functional family (If applicable) \_\_\_\_\_  
Written Lease or Oral Lease: \_\_\_\_\_

Apt/Room Identifier (letter/number) of Rental Unit: \_\_\_\_\_  
Is this Unit Vacant or Occupied? \_\_\_\_\_  
Square Footage of Habitable Space in this Unit: \_\_\_\_\_  
Maximum Number of Tenants Allowed\* \_\_\_\_\_  
Traditional or functional family (If applicable) \_\_\_\_\_  
Written Lease or Oral Lease: \_\_\_\_\_

Apt/Room Identifier (letter/number) of Rental Unit: \_\_\_\_\_  
Is this Unit Vacant or Occupied? \_\_\_\_\_  
Square Footage of Habitable Space in this Unit: \_\_\_\_\_  
Maximum Number of Tenants Allowed\* \_\_\_\_\_  
Traditional or functional family (If applicable) \_\_\_\_\_  
Written Lease or Oral Lease: \_\_\_\_\_

I, \_\_\_\_\_, hereby apply for the City of Cortland

Rental Registry Permit and affirm that written leases contain language from City of Cortland Rental Housing Law Section 102-19.

I further request and authorize an inspection of the rental property, owned by me, at \_\_\_\_\_ in the City of Cortland, New York.

\_\_\_\_\_  
Signature

OR

I am not requesting an inspection of the rental property, owned by me, at \_\_\_\_\_ in the City of Cortland, New York, and by my signature, certify that the property is in compliance with all applicable codes and standards as provided on the attached self-certification form.

\_\_\_\_\_  
Signature

Any false statement made herein is punishable as a Class A Misdemeanor pursuant to section 210.45 of the New York State Penal Law.

Date: \_\_\_\_\_  
\_\_\_\_\_  
Signature

An \$80.00 Registration Fee is required to be submitted with this application

Within thirty (30) days of a change in the information provided, the owner shall complete and submit a new registration form for each building affected by the change. In the instance of a transfer of ownership of the property, the buyer/seller of the property shall give notice in writing to the Code Enforcement Office within two (2) business days after closing. This notice shall include the name and address of the buyer. The buyer of the property shall complete and submit a new registration form for each building within ten (10) business days after closing.

City of Cortland Rental Housing Law Section 102-19: Contained in written lease in 10 Pt or larger: "Please take notice that you and the landlord each have certain rights and responsibilities under the City of Cortland Rental Housing Law, a copy of which is available in the City Hall, 25 Court Street, Cortland, New York, 13045"

As noted on page 2 of this application, if you are anyone other than an individual owner, you are required to return this page with your Rental Registration Application.

Owner is a Partnership, Limited Liability Partnership, Joint Tenancy, Tenancy in Common, Tenancy by Entirety, Association or Other:

Each Owner, Partner's or General Partner's Name(s), Residence Address, Business Address, telephone # and E-mail:

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

Name and Residence Addresses:

1) \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

2) \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

3) \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

4) \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Business Address:

1) \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

2) \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

3) \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

4) \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Telephone and Email:

1) \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

2) \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

3) \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

4) \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Owner is a Corporation or Limited Liability Company

Principal place of business for Corporation or Limited Liability Company:

\_\_\_\_\_

Please provide the Name, Title and Residence Address of each Officer, Director and Managing Agent of the said Corporation or Limited Liability Company:

Name:      1) \_\_\_\_\_ 2) \_\_\_\_\_ 3) \_\_\_\_\_      Title:  
\_\_\_\_\_

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