

# Rental Registration Application

You must submit a separate registration form for **each** parcel



**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 rental units shall complete this form and register the building with the City Code Enforcement Office.

Within thirty (30) days of a change in the information provided below, 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.

Post Office Boxes shall not be accepted as an owner's or agent's 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.

Please be advised, in addition to any other remedies available under the law, any owner of a property which contains a building with one or more rental dwelling units who fails to comply with the requirements of the City of Cortland Rental Housing Law, must apply for and obtain a Rental Permit pursuant to the City of Cortland Rental Housing Law or may be subject to a shut down notice. Furthermore, the owner shall also be subject to the penalties set forth in the City of Cortland Rental Housing Law.

Office Use Only:	Parcel Identification Number: _____
Date Application Received: _____	Temporary Rental Permit #: _____
Inspection Date: _____	Inspected By: _____
Rental Permit Approved: <input type="checkbox"/> Yes <input type="checkbox"/> No	
Rental Permit NOT Approved Details: _____	
If Yes, Rental Permit Number: _____	
Rental Permit Valid Until : _____	
Inspection Frequency: <input type="checkbox"/> 1 Year <input type="checkbox"/> 3 Year	
_____ Vacant Building	

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

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

Type of Application:  New  Change in Property, 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.

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. If you wish for correspondence to be sent elsewhere, for example, your property manager/designated agent above, please provide that in the space below. Please be advised that if this information changes, it is your responsibility to contact our office to file a new Rental Registration Application.

Contact: \_\_\_\_\_

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

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

## Rental Property Information

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 or cellar? \_\_\_ If yes, is there habitable space? \_\_\_\_\_

Is there an attic? \_\_\_ If yes, is there habitable space? \_\_\_\_\_

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

Are there auxiliary buildings? Yes \_\_\_ No \_\_\_ If yes, please indicate with an X

which closest describes the auxiliary buildings: \_\_\_1 car garage; \_\_\_2 car garage;

\_\_\_3 or more car garage; \_\_\_Shed \_\_\_ Other (describe) \_\_\_\_\_

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

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

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: \_\_\_\_\_  
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: \_\_\_\_\_  
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: \_\_\_\_\_  
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: \_\_\_\_\_  
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: \_\_\_\_\_  
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: \_\_\_\_\_  
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 III (K)<sup>1</sup>. I further authorize the required inspection of the rental property, owned by me, at \_\_\_\_\_ in the City of Cortland, New York.

**YOU WILL BE CONTACTED WITH A SCHEDULED INSPECTION DATE AND TIME.**

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

**Registration Fee is required to be submitted with this application as follows:**

**If postmarked on or before May 31, 2010 the fee is \$60.00**

**If postmarked after May 31, 2010 the fee is \$80.00**

**A Penalty may be assessed after Aug 1, 2010**

<sup>1</sup> City of Cortland Rental Housing Law Section III (K): 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:

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:	_____	_____	_____
	_____	_____	_____

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