

Rental License Application

_____New Application

____Renewal

3750 Bridge Street NW St. Francis, MN 55070 Phone: 763-753-2630

Property Address:	
Tax Parcel ID #:	

Property Type	Single Family	Duplex/Townhouse		Apartment	
(Check all that apply)	ADU (Attached)	ADU (Detached)		Short-term Rental	
	# of Units:	# of Occupants:			
Owner or Owner's Representative	Name(s):				
	Address:				
	City:		State:		Zip:
	Phone:		Email:		
Local Agent or Management Company	Name(s}:				
IF different than Owner	Address:				
	City:		State:		Zip:
	Phone:		Email:		

*All new and converted properties will require a property inspection for licensing. Renewals will be inspected based on City code.

Applications may be submitted in person or mailed with payment and will <u>NOT</u> be accepted via email or fax. Mail to: City of St. Francis, Community Development, 3750 Bridge Street NW, St. Francis, MN 55070

License Registration Fee for New and Renewal					
Single Family – 1 Unit	Multi-Famil	y Units 2+			
\$50.00 each	1 st Unit	\$50.00	Each Additional Unit: \$15.00		
Late Fee Due 1/16:	\$50.00		Late Fee Due 3/16: \$150.00		
Conversion Fee:	\$100.00		Re-inspection Fee: \$25/each unit		
			Total Fee: \$		

Each license shall be good for the two (2) years following the odd/even schedule and expire on January 31st.

Applications are due no later than January 15th to avoid late fees. Your license will arrive by mail at the address listed above after any necessary inspections and Council approval

Acknowledgement of Responsibility: By signing, you acknowledge that you have reviewed City Code: Chapter 4, Section 6 as amended 8-19-2019 and agree to abide to the terms therein stated.

Applicant Name: _____

Signature: _____ Date: _____

IF THIS PROPERTY IS NOT BEING USED AS A RENTAL PROPERTY, PLEASE COMPLETE THE FOLLOWING AND ATTACH NECESSARY SUPPORTING DOCUMENTATION:

I hereby certify the above rental license application was sent to me as the owner of

_(property address) in error. This dwelling is only being used as a single family owner-occupied structure. This property is not being rented in part or in whole.

The attached documents verify this certification. Attachment may include: Anoka County property record of homestead, tax statement or similar identify owner at property address. Utilities do not meet requirement. Without documentation, Certification will not be accepted.

Owner's Name:

Signature:

Date: _____

For Staff Use Only		
Delinquent Tax	No	Yes, Amount \$
Delinquent Utilities	No	Yes, Amount \$
Document for Certify	No	Yes, Type:
Inspection	No	Yes, Date: