

Riverdale Fire-Rescue Department

725 West 138th Street ● Riverdale, Illinois ● 60827 Inspectional Services 708/849-1798 Fax: (708) 896-6594

www.villageofriverdale.net

Annual Year

ANNUAL RENTAL LICENSE APPLICATION FOR RENTAL PROPERTIES

BUILDING ADDRESS			PIN/TAX#			
Basement Apartment/(s) ? Yes						
☐ Single-Family Home/Townhouse	/Condo Multi-Family D	welling # of unit's	Mixed Used Property # of unit's			
OWNER INFORMATION						
BUILDING OWNER						
OWNER ADDRESS (NO PO BOXES)			/ /			
MAILING ADDRESS (JE DIEFERENT)	NO. AND STREET		CITY STATE ZIP			
OWNER PHONE AND CONTACT INFO		· · · · · · · · · · · · · · · · · · ·	CITY STATE ZIP			
		CELL PHONE	FAX #			
MANAGEMENT INFORMATION -	IF NOT OWNER MUST PF	ROVIDE PROOF OF AU	THORIZATION			
NAME	ADDI	RESS				
CITY/STATE/ZIP		PHONE				
completed the Crime Free Housing Sen turned in and have no outstanding debt	Term arantee that you will receive ar ninar (seminar must have been in the Village of Riverdale. An	s and Conditions on Annual Rental License. You on attended by owner or curre onual Rental Licenses are no	ou must comply with a Village Inspection, have ent management company, all forms completed and on-transferable.			
	e ticket being written with mini	mum \$250.00 fine. Fines ca	your Rental License before November1st will result in a an be issued each day you are not in compliance. You will double as of November 1st.			
Please use the back pa	age to list all tenant	ts and occupants i	living in the property. Applications			
that are not completed	l in full will not be a	ccepted.				
By signing be	low, you acknowledge that y	ou understand and agree	to all the above conditions.			
Applicant Printed Name:						
Applicant Signature:						
Date:						
	VILLA	GE USE ONL	Υ			
TE PAID:	AMOUNT PA	ID:	NUMBER OF UNITS:			
SPECTION DATE:	\$		FEES: \$55 1-2 Unit Buildings \$25/unit 3+ Unit Buildings			
CENSE ISSUED DATE:	TYPE OF PA	YMENT: CASH	NOVEMBER 1 – ALL FEES DOUBLE			
ENSE #:	CREDIT:	/	CRIME FREE COURSE DATE:			
		,				
tials:	CHECK: #					

PLEASE LIST THE OCCUPANCY OF EVERY UNIT IN THE BUILDING. LIST THE INFORMATION EVEN IF YOU (THE LANDLORD OR MANAGER) ARE THE OCCUPANT. IF A UNIT IS VACANT, PLEASE WRITE "VACANT" IN THE TENANT'S NAME SECTION. YOUR APPLICATION WILL NOT BE ACCEPTED WITHOUT THIS INFORMATION BEING COMPLETED. APPLICATIONS ARE SUBJECT TO RANDOM AUDITING TO ENSURE ACCURACY. USE ADDITIONAL SHEETS IF NECESSARY.

Pro	oertv	Address:		

NAMES OF TENANTS & OCCUPANTS	Put, A- Adult 18y+ (or C for Child)	PHONE NUMBER	APT.#	DATE OF OCCUPANCY	CRIME FREE LEASE ADDENDUM SIGNED (Y OR N)	DATE OF BACKGROUND CHECK	SECTION 8 NUMBER