

City of Plano Multi-Family Dwelling Registration



Section I: Property Information *(required)*

Property Name: _____	On-site Office: <input type="checkbox"/> Yes <input type="checkbox"/> No
Property Address: _____	City _____ State _____ Zip Code _____
Telephone Number: _____	
Fax Number: _____	E-Mail: _____
Mortgage Lien Holder Name: _____	
Mortgage Lien Holder Address: _____	
Total Number of Buildings: _____	Total Number of Units _____ Year Built _____

Section II: Property Owner Information *(required)*

Property Owner refers to person or persons with legal title

Ownership Type: <input type="checkbox"/> Sole Proprietorship <input type="checkbox"/> Partnership <input type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Other	
Property Owner's Name: _____	
Owner's Address: _____	City _____ State _____ Zip Code _____
Telephone Number: _____	
Fax Number: _____	E-Mail: _____
Drivers License Number/State: _____	
If owner is partnership, corporation or trust, complete the following for <u>one</u> partner, officer or trustee:	
Tax ID Number of partnership or corporation: _____	
Name: _____	Title: _____
Address: _____	City _____ State _____ Zip Code _____
Telephone Number: _____	

Section III: Management Company, Operator, Agent or Contact Person *(required)*

Name of: <input type="checkbox"/> Management Co. <input type="checkbox"/> Operator <input type="checkbox"/> Agent <input type="checkbox"/> Contact Person: _____	
Address: _____	City _____ State _____ Zip Code _____
If management company, operator, agent or contact person is partnership, corporation or trust, complete the following for <u>one</u> partner, officer or trustee:	
Tax ID Number of partnership or corporation: _____	
Name and Title: _____	
Address: _____	City _____ State _____ Zip Code _____
Telephone Number: _____	After Hours Contact Number: _____

Preferred Mailing Address for all Correspondence: _____

List the following information for all structures on the premises with rental units:

Address: _____ Building # _____ Unit #'s _____

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<p>Make checks payable to: <i>City of Plano</i> Mail completed form and payment to: <i>City of Plano</i> <i>Property Standards Dept.-JUF</i> <i>P O Box 860358</i> <i>Plano, TX 75086-0358</i></p>
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Fees for Rental Registration are: \$10.00 per Unit

Total number of rental units: _____ x \$10.00 per unit = \$ _____
(Amount due)

The above information is true and correct to the best of my knowledge and beliefs.

Printed Name: _____

Signature: _____ Date: _____