City of Gem Lake Heritage Hall



4200 Otter Lake Road | Gem Lake, MN 55110 651-747-2790/92 | 651-747-2795 (fax) E-mail city@gemlakemn.org

Rental License Application

Choose: New Rental R	Renewals due 60 days before the b	eginning of ever	ry even year	
Where would you like your Rental Lic		Address P	Property Manager Address	S
Rental Property Address				
Address:				
City:			State:	Zip:
Property Type				
Single Family \$100.00 House Condo / Townhouse	Two-Family \$50.00 / Unit Duplex			
Total Fee \$				
Owner Information (Individual				
Property Owner Names:				
Mailing Address:				
City:			State:	Zip:
Home Phone:	Wor	k Phone:		_
	Email:			
Federal Tax ID #:	MN Tax ID #:		SSN or Ind. Taxpayer	: ID #
Property Management Agent In	formation (person authorized to handle c	omplaints)		
Name:				
Mailing Address:				
City:			State:	Zip:
Contact Person:		Phone:		
Cell Phone:	Email:			
Federal Tax ID #:	MN Tax ID #: S		SSN or Ind. Taxpayer ID #	
Renter Name(s)				
Name:				
of the State of Minnesota. I understand the owner or authorized agent and the	nintain the subject premises identified herein accord that I could be held responsible for any City Ord answers contained herein are true and accurate in 5 and acknowledge that no rental license will be is	inance violation(all respect to the	(s) which may occur on me best of my knowledge an	y rental property. I certify that I am ad belief. I agree to allow inspections
	iated with this rental property and notifying the ut bills may be certified to Ramsey County, and atta			ity, regardless of my arrangement
Applicant Signature:			Date:	
Office Use Only		License No.		
Approved by:			Date:	