



CITY OF LUDINGTON

400 S HARRISON STREET

LUDINGTON, MI 49431
 (231) 845-6237 FX (231) 845-1146
WWW.LUDINGTON-MI.GOV

Rental Registration

Please Select One: New Registration Renewal Transfer of Ownership

OWNER INFORMATION (PLEASE PRINT)

Name of Owner:

Address:

Phone # Cell # email address:

PROPERTY MANAGER INFORMATION (if applicable)

Name of Property Manager:

Address:

Phone# Cell# email:

This rental property is inspected by: HUD _____ MSHDA _____

RENTAL INFORMATION

Property Address	Number of Units	Mailing Address of Units (Unit #)	Notes

FEE CALCULATIONS: Total number of units _____ X \$25 per unit = \$ _____. I, the undersigned, do hereby attest to the truth and accuracy of the information contained in this application and understand that falsification of this application may result in application denial. I do hereby grant the City of Ludington permission to conduct any and all inspections required and affirm that all tenants of the subject property will be informed of required and scheduled inspections.

Signature of Owner/Agent: _____ Date: _____

PLEASE MAKE CHECKS PAYABLE TO CITY OF LUDINGTON.

Return all forms and fees to: City of Ludington Rental Registration, 400 S. Harrison St., Ludington, MI 49431.