



RESIDENTIAL RENTAL PROPERTY PERMIT APPLICATION

City of New Port Richey
Code Enforcement Division
Police Department, 6739 Adams St
New Port Richey, FL 34652
Phone: (727) 232-8946 Email: Residentialrentals@cityofnewportrichey.org

Permit Fee: \$70.00 per Rental Property

Please complete the following information in full. Return the completed application to the above address or email. Rental Permits are issued for a calendar year (January 1st through December 31st). Once your application is processed, you will receive notice on how to complete your payment and receive your rental permit.

PLEASE PRINT OR TYPE

PROPERTY OWNER INFORMATION: Exempt from Public Record: Yes No

Name	_____		
Mailing Address	_____		
	City _____	State _____	Zip _____
Email Address	_____		
Home Phone	_____	Business Phone	_____

AGENT OR PROPERTY MANAGER INFORMATION:

NOTE: Local representative must have a local address in the surrounding counties
(not a public P.O Box or any other private mail service).

Name	_____		
Mailing Address	_____		
	City _____	State _____	Zip _____
Email Address	_____		
Home Phone	_____	Business Phone	_____

PROPERTY INFORMATION

	Property Address(es) <i>Only list addressed within City limits</i>	Single Family	Duplex	Triplex	Number Of Units
1.					
2.					
3.					
4.					
5.					
6.					
7.					
8.					
9.					
10.					

Additional properties listed on separate sheet of paper or on the back of this form? Yes No

Are properties connected together? Yes No

APPLICANT'S ACKNOWLEDGEMENT

I acknowledge that I am the property owner or owner's legal agent and that the information given in this application is complete and accurate and I understand that to make false or fraudulent statements within this application may result in a denial of the permit and possible legal action. If granted a permit, as the Owner or Legal Agent I agree to operate within the city and state laws, and to provide notification within ten (10) days to the Code Enforcement Division of any changes to the information provided on this form.

Printed Name _____

Signature _____

Title _____

Date _____

OFFICE USE ONLY

Application Taken By: _____	Date: _____
Application Processed By: _____	Date: _____