



Rental Registration Application

You must submit a separate registration form for each parcel.

Pursuant to the Village of Airmont Rental Registry Law, the owner of each building containing one or more rental units shall complete this form and register the building with the Village of Airmont Building Department.

Within thirty (30) days of a change in the information provided below, the owner shall complete and submit a new registration form for each building affected by the change. In the instance of a transfer of ownership of the property, the buyer/seller of the property shall give notice in writing to the Building Department within two (2) business days after closing. This notice shall include the name and address of the buyer. The buyer of the property shall complete and submit a new registration form for each building within ten (10) business days after closing.

Post Office Boxes shall not be accepted as an owner's or agent's physical address. There is space provided below for the mailing address. The building intended to be registered shall not be utilized as the owner's or agent's address.

Office Use Only:	Parcel Identification Number: _____
Date Application Received: _____	Temporary Rental Permit #: _____
Inspection Date: _____	Inspected By: _____
Rental Permit Approved: <input type="checkbox"/> Yes <input type="checkbox"/> No	
Rental Permit NOT Approved Details: _____	
If Yes, Rental Permit Number: _____	
Rental Permit Valid Until : _____	

Required Owner Information

Physical Address of Rental Property: _____

Tax Map ID #: _____

Type of Application: New Change in Property, Property Owner or Agent
 Renewal

Property Owner Name(s): _____

Type of Owner:

- | | | |
|--|--|--|
| <input type="checkbox"/> Individual | <input type="checkbox"/> Partnership | <input type="checkbox"/> Limited Liability Partnership |
| <input type="checkbox"/> Joint Tenancy | <input type="checkbox"/> Tenancy in Common | <input type="checkbox"/> Tenancy by Entirety |
| <input type="checkbox"/> Association | <input type="checkbox"/> Corporation | <input type="checkbox"/> Limited Liability Company |
| <input type="checkbox"/> Other: | | |

** Please note: if you checked any box other than individual above, you will need to complete page 5 of this registration.

Physical Address: **(NO P.O. BOXES)** _____

City/State/Zip: _____

Email Address: _____

Home Phone: _____ Work Phone: _____

Cell Phone: _____

Mailing Address: _____

If you do not live in Rockland County, a local agent/contact is required.

Agent/Local Contact Name(s): _____

Address: _____

City/State/Zip: _____

Home Phone: _____ Work Phone: _____

Cell Phone: _____

All official correspondence (Notices, Violation Notices, Invoices, Etc.) will be mailed to the address of record provided to the Village of Airmont. If you wish for correspondence to be sent elsewhere, for example, your property manager/designated agent above, please provide that

in the space below. Please be advised that if this information changes, it is your responsibility to contact our office to file a new Rental Registration Application.

Contact: _____

Address: _____

City/State/Zip: _____

Rental Property Information

Number of Rental Buildings on Parcel: _____

Number of Rental Units per Building: _____

Number of Total Units by Stories: ___1st Floor ___2nd Floor ___3rd Floor

Is there a basement or cellar? _____ If yes, is there habitable space? _____

Is there an attic? _____ If yes, is there habitable space? _____

Is there a sprinkler system in the building? _____ Date of Last Inspection _____

Are there auxiliary buildings? Yes ___ No___ If yes, please indicate with an X which closest describes the auxiliary buildings: ___1 car garage; ___2 car garage; ___3 or more car garage; ___Shed _____ Other (describe) _____

The following questions are pertinent to each specific rental dwelling unit: (if there are more units, add additional sheets as needed)

Apt/Room Identifier (letter/number) of Rental Unit: _____

Is this Unit Vacant or Occupied? _____

Square Footage of Habitable Space in this Unit: _____

Maximum Number of Tenants Allowed: _____

Written Lease or Oral Lease: _____

Apt/Room Identifier (letter/number) of Rental Unit: _____

Is this Unit Vacant or Occupied? _____

Square Footage of Habitable Space in this Unit: _____

Maximum Number of Tenants Allowed: _____

Written Lease or Oral Lease: _____

I, _____, hereby apply for the Village of Airmont Rental Registry Permit I further authorize the required inspection of the rental property, owned by me, at _____ in the Village of Airmont, New York.

YOU WILL BE CONTACTED WITH A SCHEDULED INSPECTION DATE AND TIME.

Any false statement made herein is punishable as a Class A Misdemeanor pursuant to section 210.45 of the New York State Penal Law.

Date: _____ Signature _____

Registration Fee is required to be submitted with this application as follows:

If postmarked on or before May 31 the fee is \$ _____

If postmarked after May 31 the fee is \$ _____

A Penalty may be assessed after Aug 1.

As noted on page 2 of this application, if you are anyone other than an individual owner, you are required to return this page with your Rental Registration Application.

Owner is a Partnership, Limited Liability Partnership, Joint Tenancy, Tenancy in Common, Tenancy by Entirety, Association or Other:

Each Owner, Partner's or General Partner's Name(s), Residence Address, Business Address, telephone # and E-mail:

Name and Residence Addresses:

1) _____	2) _____
_____	_____
_____	_____
3) _____	4) _____
_____	_____
_____	_____

Business Address:

1) _____	2) _____
_____	_____
_____	_____
3) _____	4) _____
_____	_____
_____	_____

Telephone and Email:

1) _____	2) _____
_____	_____
_____	_____

3) _____ 4) _____

Owner is a Corporation or Limited Liability Company

Principal place of business for Corporation or Limited Liability Company:

Please provide the Name, Title and Residence Address of each Officer, Director and Managing Agent of the said Corporation or Limited Liability Company:

1) _____ Name _____ Title _____ Residence	2) _____ Name _____ Title _____ Residence
3) _____ Name _____ Title _____ Residence	4) _____ Name _____ Title _____ Residence