OFFICE USE ONLY

Date Entered _____

Entered By___



MONTGOMERY COUNTY DEPARTMENT OF HOUSING AND COMMUNITY AFFAIRS



MAIL APPLICATION TO: Licensing and Registration • 1401 Rockville Pike, 4th Floor • Rockville, Maryland 20852

Telephone 240-777-0311 • TTD 240-777-3679

www.montgomerycountymd.gov/dhcalicensing

RENTAL FACILITY LICENSE APPLICATION

Multi-Family Apartment Complex

IMPORTANT INFORMATION (Read Carefully):Incomplete applications will delay the license.

Application MUST be mailed with payment.

Application MUST be signed.

	-	eck or Money Order or Iontgomery County ME	-		Deposit By		
	Refunds requi	ests must be made in include documentation		Year Built			
	ar is July 1 through June 3 se fee is \$52.00 per rental (due as follows:			
	Total Number of Res	idential Rental Units		(Do Not inc	lude Units used for	Offices or Mode	els)
	ı	Per unit License Fee	X \$76.00	(Including	Rent Roll for all re apartment numbe ompany every App	r if applicable)	
	TOTAL	AMOUNT DUE					
Is this a New	Owner/Transfer of Ex	isting License? Ye	es / No				
\$10 per unit T (Must apply withi	ransfer Fee Due for N n 15 days of purchase or fu	New Owners buyin ıll Fiscal Year fee is du	g Licensed P e per unit)	roperty			
Complied with	Rights of First Refus	sal (ROFR)? Yes /	No				
		RENTAL I	PROPERTY I	NFORMATI	ON:		
Name of Comple	v						
maine or Comple	^						
	^					Unit #	
Street Address _						Unit #	
Street Address _ City Plea		OWNER nation in the appropri	Zip Coo RSHIP INFOR jate section on oprietorship	de MATION ly. For addition (Individual)	nal owners please	e use separate	e sheet.
Street Address _ City Plea Dwner's Name (Sa	se provide owner inform	OWNER nation in the appropri	Zip Coo RSHIP INFOR iate section on oprietorship	de MATION ly. For addition (Individual)	nal owners please	e use separate	e sheet.
Street Address _ City Plea Dwner's Name (Sa Street Address	se provide owner inform	OWNER nation in the appropri	Zip Coo RSHIP INFOR iate section on oprietorship	dede MATION ly. For addition (Individual)	nal owners pleaso	e use separate	e sheet.
Street Address City Plea Owner's Name (Sa Street Address City	se provide owner inform	OWNER nation in the appropri Sole Pro	Zip Coo	MATION ly. For addition (Individual) _ Country	nal owners please	e use separate	e sheet.
Street Address _ City Plea Owner's Name (Sa Street Address City	se provide owner inform	OWNER nation in the appropri Sole Pro	Zip Coo RSHIP INFOR iate section on pprietorship	MATION ly. For addition (Individual) _ Country	nal owners please	e use separate	e sheet.

Partnership or Limited Liability Company

Must provide contact information on owners and/or general partner. Please provide on separate sheet.

Name of	Partne	rship o	r LLC																					 	
General I																								 	
Street Ad	ddress _																								
City									s	tate _				Co	untry _				Z	ip Co	de _				
Daytime	Phone							Cel	lular I	Phone	e #							Fax	Phone	e #				 	
Email Add	Iress: (P	lease P	rint)	1									ı							1					
											requ	ired		Corpc	rate (•								
Name of																									
Name of																								 	
Street Ad																								 	
City																									
Daytime	Phone_							Cell	ular F	hone								Fax F	hone #	<u> </u>				 	
Email Ad	dress:	(Pleas	e Print)																					
												Tr	ust												
Name of	Trust_																							 	
Trustee's	Name																								
Street Ad	ddress _																							 	
City															State				Zip	Code				 	
Daytime	Phone_							Cell	ular F	hone								Fax P	hone #	!				 	
Email Add	Iress: (P	lease P	rint)																						
		С	ontac	t nan	ne or	addre											TION ent wit		0 day	s of t	he (chang	je.		
Agent/Ma	anagem	ent Na	ame _											_*(Ad	ministı	rative .	Agent	will re	eceive	all rei	new	al bills	;)		
Company	y Name	:																					_		
Street Ad	ldress _																								
City					_ State	·			_ Cc	untry					_ Zip	Code	e								
Daytime I	Phone_				_	Cellu	lar Ph	none _						_	Fa	x Pho	ne								
Email Ad	dress: (Pleas	e Print)																					

LEGAL AGENT

The law requires all owners assign a Legal Agent who resides in Maryland to receive legal service of process. Owners residing in Maryland may designate themselves. Owners who do not reside in Maryland **MUST** designate a Legal Agent.

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-	Owr	ner des	gnate	s the	belo	ow nai	med	Mary	/land	reside	ent as	Lega	l Agei	nt							
Legal	Agent Na	ame																			
Street	Address																				
City _								s	tate _	М)	Coun	try				Zip C	ode _			
Daytin	ne Phone)					Cel	lular P	hone .						Fax	Phon	ne				
Email	Address:	(Please	Print)					_	_								_				
X	Leg	al Agen				ассер	ot res	spon:	sibili	ty as	Leya	i Ayei	it ioi	Sel V		ate	yaı pı	roce:	ss: 		
	have a	al Agen	t Sign	ature	the	lease	agre	emer	Leas	se Ag	reem	ent o pros	specti	ve te	D	ate	ludin			 e	
	have a	al Agen	t Sign	ature	the	lease	agre	emer	Leas	se Ag	reem ered to	ent o pros	specti	ve te	D	ate	ludin			e	
	have a addend	al Agen	t Sign	ature by of regul	the lation	lease	agred I rent	emer	Leas	se Aging off	reem ered to	ent o pros eferer	specti	ve tei	nants	ate	ludin			e	

MARYLAND DEPARTMENT OF ENVIRONMENT LEAD POISONING PREVENTION

NOTE: All multi-family properties built before 1978 MUST list Lead Inspection Certificate #'s for each rental unit.

Maryland State law requires all owners renting residential properties to register the rental property with MDE. If the property was built before January 1, 1978, it is required to be tested for lead poisoning. [Statutory requirements of Article 24, Political Subdivisions, 19-103 1. Is the property built before January 1, 1978? YES □ NO □ Year Built: If answer to question #1 is NO, DO NOT answer questions 2, 3, & 4. You do not have to register your property with MDE. If the answer is YES, please complete questions. 2. Is this property registered with MDE? YES □ NO □ Tracking #: If NO, contact MDE 1-800-633-6101 to register. Is the registration current? YES □ NO □ 3. What is the Lead Inspection Certificate # for current tenancy: _ Mail a photocopy of lead inspection certificates with application. For more information on requirements for obtaining your lead inspection certificate, contact Maryland Department of Environment at 1-800-633-6101 ext. 4199 or 410-537-4199 or www.mde.state.md.us/lead. **AUTHORIZED SIGNATURE OF APPLICATION LICENSE:** By my signing this application, I am the owner or have authorization to sign on behalf of the owner. I understand that falsifying information can result in having this rental license application denied and the property will not be licensed to rent. I affirm under penalty of perjury that the information on this application is true to the best of my knowledge and belief. I also understand that if there are changes in property ownership, owner address, or agent/contact information that I must notify MC/DHCA Licensing and Registration within 10 day of the change. I also understand penalty can be assessed in a civil citation of \$500 if the rental property is not licensed. **Authorized Signature Print or Type Name of Person Signing** Please note: If your check is returned unpaid, your account will be debited electronically for the original check amount and electronically or via paper for the state's maximum allowable service fee. Payment by check constitutes authorization of these transactions.

HAS THE OWNER: Enclosed a copy of the rent roll for this multi-family? Signed the Application? Designated a Legal Agent in Maryland? Enclosed a copy of property Lead Inspection Certificates? Enclosed copy of lease being used (with addenda) or confirmed using County's sample lease?
Made Check Payable to Montgomery County, Maryland?