

COMMUNITY AND ECONOMIC DEVELOPMENT

1420 Miner Street Des Plaines, IL 60016 P: 847-391-5366

W: desplaines.org

CHECKLIST FOR RENTAL PROPERTY LICENSE

ALL APPLICANTS MUST REMIT THE FOLLOWING DOCUMENTS FOR PROCESSING Completed application for the Rental Property License Original signed affidavit attesting to zoning regulations Payment for the appropriate fee (made payable to City of Des Plaines): Fees are reduced by 50% for applications submitted after July 1st each year - House / Single Family Detached Dwelling \$100.00 - Townhouse / Single Family Attached Dwelling \$50.00 - Condominium / Single Unit in a Multi Family Building \$20.00 - Apartment / Multiple Unit Dwelling (fee per unit) \$20.00

CRIME FREE MULTI-HOUSING PROGRAM INFORMATION

All applicants for a rental license must take the Phase 1 class *prior* to obtaining a rental license. If you have taken this class in another town where you own rental property, please include a copy of the completion certificate with this application. A program classified as a "Landlord" class or completion of an online program does not meet the requirements for the City of Des Plaines municipal code.

Registration for the class is required by completing the following:

- 1. **Internet:** visit www.desplaines.org
 - a. Hover over 'I Want To..."
 - b. Under "Apply For", click on Crime Free Housing Seminar
 - c. Complete and Submit Registration
 An email will be sent within 24-72 hours confirming the registration. If a confirmation email is not received, please call 847-391-5366.
- 2. **Phone:** Please call 847-391-5366

DEPARTMENT PHONE NUMBERS FOR FURTHER QUESTIONS OR CONCERNS

- Housing and Code Enforcement / 847-391-6973
 For information pertaining to housing requirements and codes
- <u>Fire Prevention Bureau / 847-391-5340</u>
 For information pertaining to fire safety requirements
- <u>Crime Free Multi Housing Program Director / 847-391-5410</u>
 For information pertaining to materials and landlord requirements for the program
- <u>Licensing Division / 847-391-5366</u>
 For information on registration requirements, licensing requirements and status of an application



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APPLICATION FOR RENTAL PROPERTY LICENSE

| PROPERTY INFORMATION | | | |
|---|---|--|---|
| Address: | | Unit #: | Zip: |
| Date of Ownership:D | ate Property Convert | ed to Rental: | |
| PROPERTY OWNER INFORMATION | | | |
| Name: | | Phone #: | |
| Address: | | Email: | |
| City: | | State: | Zip: |
| If property is owned by a corporation, LLC/LP, ban | k, or placed in a trust | , please complete th | e following information: |
| President or trustee: | | Phone #: | |
| Home Address: | | Email: | |
| City: | | State: | Zip: |
| PROPERTY MANAGER INFORMATION (if applicab | <u>le)</u> | | |
| Name: | | Phone #: | |
| Address: | | Email: | |
| City: | | State: | Zip: |
| All correspondence, annual invoice and the certific | cate pertaining to the | rental property are | to be sent to: |
| ☐ PROPERTY OWN | ER 🗆 | PROPERTY MANAG | ER |
| CRIME FREE MULTI-HOUSING PROGRAM INFORM | <u>IATION</u> | | |
| Has the property owner or property manager com | pleted Phase 1 or the | e Crime Free Multi-H | ousing Program? |
| □ NO | YES - Attach a copy o | of the certificate of completion | |
| PROPERTY CLASSIFICATION AND FEE | | | |
| SINGLE FAMILY HOUSE - \$100.00 | SINGLE FAMILY TO | WNHOUSE - \$50.00 | |
| SINGLE FAMILY UNIT CONDOMINIUM - \$2 | APARTMENTS - \$20 | 0.00 per unit/# of units: | |
| <u>ATTESTATION</u> | | | |
| I certify the above information is true and accurate information provided, it is my responsibility to renthe certificate expires on December 31st of each you the following year, it is my responsibility to renew. | nit current informatio rear. If the property w | on in a reasonable am vill be used as a renta | nount of time. I understand al property at any time during |
| Owner Signature | | | Date |
| FOR OFFICE USE ONLY Zoning / Initials: | | | s: |
| 5/18/2023 | | | |

| STATE OF ILLINOIS | (| |
|---------------------------------|--|---|
| COUNTY OF COOK |) ss.) | |
| | | AFFIDAVIT |
| The undersig | ned Affiant, having been fi | rst duly sworn, on oath say, state as follows: |
| 1) That | Affiant, | ("Owner"), is a legal owner |
| of the proper | rty located at | |
| Des Plaines, | IL. ("Property"). | |
| a Single-Fam | | y, I understand this Property is zoned and categorized as include a hotel, motel, boarding house, rooming house, transient lodging. |
| 3) That a portions of the | <u>-</u> | ry, I understand I am not permitted to rent rooms or |
| , | as the Owner of the Propert roperty as a Multi-Family D | y, I understand that I am not permitted to convert or Owelling. |
| suspension/re violate the re | evocation of the rental prope | ty, I understand additional legal action and/or immediate erty license may be taken against me should I or any tenant al codes pertaining to residential properties used as rentals |
| , | vit is falsified, as a represen | be true. I also understand that if any information provided attative, I will be subject to an Administrative Hearing and |
| | | Print Name |
| | | Signature |
| | | Date |
| | WORN to before me this | |
| day of | , 20 | |

_____ (stamp/seal)