



RENEWAL RESIDENTIAL RENTAL LICENSING APPLICATION



An application must be filed for each individual Rental Property

RENTAL PROPERTY INFORMATION

Municipal Address of Rental Property				Original License No.	
Type of Rental Unit					
		No. of bedrooms		No. of bedrooms	
Single Detached	G	_____	Triplex	G	_____
Semi-Detached	G	_____	Fourplex	G	_____
Duplex	G	_____	Townhouse	G	_____
Rent by bedroom	G		Rent entire unit	G	

PROPERTY OWNER INFORMATION:

(If there are more than two owners, please submit an additional completed page 1)

Owner's name and surname (or Corporation's name) – Printed		Business Operating Name (if applicable) - Printed	
Owner's full mailing address (street name and number, city, province and postal code)			
Business telephone number and extension	Fax number	Cell phone number	Email address

Owner's name and surname (or Corporation's name) – Printed		Business Operating Name (if applicable) - Printed	
Owner's full mailing address (street name and number, city, province and postal code)			
Business telephone number and extension	Fax number	Cell phone number	Email address

PROPERTY MANAGER'S INFORMATION - if applicable

Property Manager's Name and surname – Printed		Business Operating Name (if applicable) - Printed	
Property Manager's full mailing address (street name and number, city, province and postal code)			
Business telephone number and extension	Fax number	Cell phone number	Email address

REQUIRED DOCUMENTS

The following documents must be attached to this application before an application will be accepted. All costs incurred for obtaining any of the required documents will be the sole responsibility of the Applicant.

- Ⓒ Copy of Rental Property’s Insurance (\$2,000,000.00)
- Ⓒ Attach Revised Self-Certification Checklist and/or Site Sketch and/or Plans, if needed

The City of Thorold reserves the right to require a full application if significant changes to Property have occurred, and/or if the Checklist and/or Plan(s) submitted are deemed substantial.

- **PLEASE BE ADVISED THAT SITE INSPECTIONS ARE A REQUIREMENT OF THIS APPLICATION.**
- **THESE INSPECTIONS WILL BE CONDUCTED BY THE CITY OF THOROLD’S BY-LAW ENFORCEMENT DIVISION AND/OR FIRE DEPARTMENT WHEN REQUIRED.**
- **ONCE YOUR APPLICATION HAS BEEN REVIEWED, YOU WILL BE CONTACTED BY THE BY-LAW ENFORCEMENT DIVISION TO SCHEDULE AN APPOINTMENT FOR THE REQUIRED SITE INSPECTION.**
- **THE OWNER OR PROPERTY MANAGER MUST BE IN ATTENDANCE FOR ALL INSPECTIONS.**

DECLARATION

I / We, _____ the undersigned, declare/affirm as follows, that:
print name of registered owner

- a) I / We declare that there has not been any change in ownership;
- b) I / We hereby declare that no changes have been made to the following:
 - Ⓒ Self-Certification Checklist (checklist on-line)
 - Ⓒ Floor Plan(s) (example on-line)
 - Ⓒ Site Sketch (example on-line)
 - Ⓒ Maintenance Plan (template on-line)

which were submitted with the original application, if the checklist or any or all plans have been changed, an updated checklist and/or plan(s) are attached;

(Download Material available on www.thorold.com/residential-rental-licensing)

- c) The statements herein and attached documents, if any are attached are true;
- d) I / We have read the declaration and notice contained below.

Signature of Registered Owner(s)
I have the authority to bind the Corporation, if applicable
A Commissioner for taking Affidavits, etc.

Signature of Registered Owner(s)
I have the authority to bind the Corporation, if applicable

**** Please be advised that in the event that the License for this Property is re-issued by the Director, the License shall only be valid for the period of time for which it was originally issued. ****

Personal information on this form is collected under the authority of the Municipal Freedom of Information and Protection of Privacy Act and will be used for the purpose of determining eligibility for licensing. Questions about this collection of personal information should be directed to the City Clerk, City of Thorold, 3540 Schmon Parkway, PO Box 1044, Thorold ON (905) 227-6613, ext. 270 or clerk@thorold.com.

For Office Use Only

Issue Date (dd/mm/yyyy)	Expiry date (2 years after date of issue)	Receipt Number	Fee paid (per rental property) \$400 Non-Refundable	License Number
Payment Method Cash	Debit	Cheque	Money Order	
Signature of person issuing license				