



# RENTAL HOUSING CERTIFICATION

## GENERAL PROPERTY MAINTENANCE CHECKLIST

*(See 2021 International Property Maintenance Code for a complete listing of code requirements)*

### GENERAL

- Smoke alarms: one in each sleeping area, one outside sleeping areas (hallway), at least one on every floor including basement
- Carbon monoxide alarms: near sleeping areas in homes equipped with fuel-fired appliances and/or attached garages
- Combination smoke/carbon monoxide alarms acceptable where required
- Operable escape windows in sleeping areas
- Windows & doors in good operational condition
- Exterior windows & doors weather tight
- Window insect screens required Apr 1 - Nov 1
- Building free from structural safety defects
- Stairs free from safety defects with required handrails at proper height
- No excessive fire loads permitted (hoarding with no clear path of egress)
- Structure shall be free from unsanitary conditions and pest/rodent infestation

### EXTERIOR

- Concrete surfaces in good repair & free of safety defects (porch/steps/driveway/walkway)
- Masonry/siding/trim free from defects
- Fascia/soffits/gutters free from defects
- Roof in good repair & free of defects
- All penetrations sealed & caulked
- Chimneys operational & free from defects
- Accessory structures free from defects
- No environmental blight:
  - Grass height six (6) inches or less
  - Noxious weeds abated
  - No inoperative/unlicensed vehicles
  - No trash/debris/junk/building materials

### BASEMENTS/ATTICS/CRAWL SPACES

- Attics free from defects (visible signs of water leaks, mold, rot)
- Mechanical vents are routed to exterior of the building
- Crawl space free from defects
- Crawl space vapor barrier

- Stairs free from defects & guardrail/graspable handrail in place
- Walls free from structural defects such as bows/cracks/leaks/canted
- Sump pumps operational and NOT connected to sanitary sewer system (disconnect if necessary)
- Emergency escape window in basement sleeping areas (where sleeping use is approved)

### BATHROOMS/KITCHENS

- Plumbing systems leak-free
- Proper water pressure maintained
- Hot water temperature shall be tepid at the tap and not exceed 120°F
- Non-absorbent sealed floor coverings
- GFCI outlets where required (replacement outlets GFCI where required)
- Cabinets/countertops free from safety defects

### MECHANICAL/ELECTRICAL/PLUMBING

- Furnace safety clean & check (heat exchanger) by licensed contractor every 5 years
- Fuel fired appliances properly vented
- Proper clearance from combustible materials on furnace & water heater venting
- Habitable rooms heated to minimum 68°F
- Dryer vent made of smooth wall aluminum or other approved material (is it UL listed?)
- Dryer on independent vent routed outside
- Water heater pressure relief valve installed
- Gas lines free from defects and openings properly connected or capped
- Extension cords prohibited as permanent wiring
- Outlet & switch cover plates required
- Electrical panel properly labeled
- S-type fuses installed
- **Building Permits Required:**
  - On file for existing installations
  - Newer installations without permit shall be retroactively permitted & inspected at owner's expense (Milan Building Official's discretion)



## RENTAL HOUSING CERTIFICATION 2022-23 FEE SCHEDULE

### REGISTRATION (one-time fee per ownership of property)

SINGLE FAMILY HOUSES & ATTACHED CONDOMINIUMS	\$100
DUPLEX 2-FAMILY STRUCTURE	\$125
MULTIFAMILY BUILDINGS	\$150 EACH BUILDING
CHANGE OF OWNERSHIP OR AGENT	\$50 PER BUILDING

### INSPECTIONS (biennial cycle)

Single Family House	\$150
Two-Family Duplex Structure - Exterior Bldg & Grounds	\$75 each building
Two-Family Duplex Structure - Interior Dwelling Unit	\$75 each dwelling unit
Multifamily - Building Exterior & Grounds	\$125 each building
Multifamily - Dwelling Unit	\$75 each apartment unit
Multifamily - Accessory Facilities (mechanical/laundry/etc.)	\$70 each accessory facility
Re-Inspections (all)	\$60 each re-inspection to verify compliance
Furnace/Boiler Certification by Licensed Mechanical Contractor	Licensed Contractor Fee at Owner's Expense

### MISCELLANEOUS FEES

Late Cancellation <72 hrs notice	\$25 *(one per cycle at no cost)
Appointment No Show/Lock Out	Equal to scheduled inspection fee
Tenant Complaint Response/Inspection	\$75 Billed to Tenant if No Code Violations Verified
Tenant Complaint Re-Inspection	\$75 Billed to Owner if Code Violations Verified
Failure to Register Penalty	\$250 per Structure + required inspection fees
Administrative Inspection Warrant	\$300 Per Premises + required inspection fees

### INSPECTION FEES MUST BE PAID IN FULL PRIOR TO THE INSPECTION DATE

#### PAYMENTS MAY BE MADE:

- In person at City Hall • Monday-Thursday • 7:30 am to 5:00 pm • (cash/check/credit card)
- City drop boxes: city hall parking lot • police station parking lot
- U.S.P.S. mail (checks only)



# RENTAL HOUSING CERTIFICATION CHANGE OF OWNERSHIP OR DESIGNATED AGENT

PRIMARY PROPERTY ADDRESS: \_\_\_\_\_

### TYPE OF CHANGE

OWNERSHIP

RESPONSIBLE LOCAL AGENT

### PROPERTY TYPE AND FEE

SINGLE FAMILY (1 UNIT) \$50 FEE

DUPLEX (2 UNITS) \$50 FEE

MULTIFAMILY (>=/> 3 UNITS) \$50 FEE PER BLDG NUMBER OF BLDGS: \_\_\_\_\_ TOTAL FEE: \$ \_\_\_\_\_

### NEW OWNER INFORMATION

OWNER NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP CODE: \_\_\_\_\_

PHONE: \_\_\_\_\_ EMAIL: \_\_\_\_\_

CORPORATION RESIDENT AGENT: \_\_\_\_\_

CORPORATION PRIMARY OFFICER: \_\_\_\_\_

### \*NEW RESPONSIBLE LOCAL AGENT INFORMATION

AGENT NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP CODE: \_\_\_\_\_

PHONE: \_\_\_\_\_ EMAIL: \_\_\_\_\_

**\*IF A NEW RESPONSIBLE LOCAL AGENT IS BEING AUTHORIZED, BOTH THE OWNER AND AGENT MUST SIGN THIS FORM\***

\_\_\_\_\_  
Owner Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Agent Signature

\_\_\_\_\_  
Date



# RENTAL HOUSING FURNACE CERTIFICATION

(TO BE COMPLETED BY PERSON PERFORMING SERVICE)

Property Address: \_\_\_\_\_  
Property Owner: \_\_\_\_\_  
Name of Licensed Contractor: \_\_\_\_\_  
Contractor License Number: \_\_\_\_\_  
Date of Service/Inspection: \_\_\_\_\_

## FUEL-FIRED FURNACE INSPECTED

MAKE: \_\_\_\_\_

MODEL NO.: \_\_\_\_\_

SERIAL NO.: \_\_\_\_\_

MANUFACTURE DATE: \_\_\_\_\_

CARBON MONOXIDE READING: \_\_\_\_\_

DESCRIBE WORK PERFORMED:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Is the appliance clean and safe to operate?     YES     NO

\_\_\_\_\_  
Signature of Contractor

\_\_\_\_\_  
Date



## APPLICATION FOR RENTAL HOUSING CERTIFICATION SINGLE FAMILY & DUPLEX UNITS

PROPERTY ADDRESS: \_\_\_\_\_

PARCEL I.D. No: 19 - - - - -

**SECTION A: SINGLE FAMILY (use for single family houses & condominiums only)**

SINGLE FAMILY HOUSE OR ATTACHED CONDO/TOWNHOUSE  SINGLE FAMILY REGISTRATION FEE: \$100

**SECTION B: TWO-FAMILY DUPLEX (use for two-family duplex houses only)**

DUPLEX TWO-FAMILY HOUSE (list both addresses or unit numbers) UNIT 1: \_\_\_\_\_ UNIT 2: \_\_\_\_\_

Does the owner live in a portion of the duplex?  YES  NO If so, Identify Owner's Unit: \_\_\_\_\_

DUPLEX REGISTRATION FEE:  \$125 TWO RENTAL UNITS or  \$100 ONE RENTAL UNIT (other one owner occupied)

**SECTION C: INDIVIDUAL OWNER INFORMATION (use for personal ownership only)**

OWNER NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP CODE: \_\_\_\_\_

PHONE: \_\_\_\_\_ EMAIL: \_\_\_\_\_

**SECTION D: CORPORATE OWNER INFORMATION (use for corporate ownership only)**

CORPORATION NAME: \_\_\_\_\_ MICHIGAN ENTITY ID No: \_\_\_\_\_

CORPORATION ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP CODE: \_\_\_\_\_

PHONE: \_\_\_\_\_ EMAIL: \_\_\_\_\_

PRIMARY CORPORATE OFFICER: \_\_\_\_\_

RESIDENT AGENT: \_\_\_\_\_

RESIDENT AGENT ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP CODE: \_\_\_\_\_

PHONE: \_\_\_\_\_ EMAIL: \_\_\_\_\_

**SECTION E: RENT STATEMENT**

Please list the total amount of monthly rent collected from all sources as of date filed: UNIT 1: \_\_\_\_\_ UNIT 2: \_\_\_\_\_

**SECTION F: RESPONSIBLE LOCAL AGENT (required if owner resides > 50 miles away from Milan)**

*Property owners may designate a Responsible Local Agent. Owners who reside more than 50 miles from the City of Milan shall designate a Responsible Local Agent who resides or has a place of business within 50 miles of the city limits.*

Please provide contact information below for the **RESPONSIBLE LOCAL AGENT**. Both the owner and agent must sign below confirming the agent is authorized and accepts responsibility to receive scheduling notices, inspection reports, invoices, citations, and other legal documents on behalf of the owner.

**NOTE: THE CITY WILL SEND OFFICIAL NOTICES ONLY TO THE DESIGNATED AGENT AND NOT TO THE OWNER.**

**RESPONSIBLE LOCAL AGENT NAME:** \_\_\_\_\_

**ADDRESS:** \_\_\_\_\_

**CITY:** \_\_\_\_\_ **STATE:** \_\_\_\_\_ **ZIP CODE:** \_\_\_\_\_

**PHONE:** \_\_\_\_\_ **EMAIL:** \_\_\_\_\_

I, \_\_\_\_\_, hereby authorize and appoint \_\_\_\_\_

*who lives or has a place of business within Fifty (50) miles of the Milan City Limits, to be responsible for rental certification for the listed property and to receive all official notices for the purpose of Rental Housing Certification.*

<p>➔ _____</p> <p>Owner's Signature Designating an Agent</p> <p>_____</p> <p>Printed Name</p> <p>_____</p> <p>Date</p>	<p>➔ _____</p> <p>Designated Agent's Signature</p> <p>_____</p> <p>Printed Name</p> <p>_____</p> <p>Date</p>
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**SECTION G: OWNER'S CERTIFICATION**

I hereby certify that all statements and information provided on this form are true, complete, and accurate to the best of my knowledge. I agree to give proof of the information that I have given on this form upon official request.

➔ \_\_\_\_\_ Date \_\_\_\_\_

Owner's Signature

Thank you for registering your rental property. You will be notified of your biennial inspection date in the near future.



## APPLICATION FOR RENTAL HOUSING CERTIFICATION MULTIPLE FAMILY APARTMENT BUILDINGS

\*EACH MULTIFAMILY BUILDING ON THE PROPERTY REQUIRES A SEPARATE REGISTRATION FORM\*

PRIMARY PROPERTY ADDRESS: \_\_\_\_\_

PARCEL I.D. No: 19 - \_\_\_\_\_ COMPLEX NAME: \_\_\_\_\_

### BUILDING INFORMATION

THIS BUILDING ADDRESS: \_\_\_\_\_ NO. OF UNITS IN BLDG: \_\_\_\_\_

REGISTRATION FEE: \$150 PER BUILDING

FAILURE TO REGISTER PENALTY FEE: \$250 PER BUILDING

### INDIVIDUAL OWNER INFORMATION (use for personal ownership only)

OWNER NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP CODE: \_\_\_\_\_

PHONE: \_\_\_\_\_ EMAIL: \_\_\_\_\_

### CORPORATE OWNER INFORMATION (use for corporate ownership only)

CORPORATION NAME: \_\_\_\_\_ MICHIGAN ENTITY ID No: \_\_\_\_\_

CORPORATION ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP CODE: \_\_\_\_\_

PHONE: \_\_\_\_\_ EMAIL: \_\_\_\_\_

PRIMARY CORPORATE OFFICER: \_\_\_\_\_

RESIDENT AGENT: \_\_\_\_\_

RESIDENT AGENT ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP CODE: \_\_\_\_\_

PHONE: \_\_\_\_\_ EMAIL: \_\_\_\_\_

**SECTION F**

**RESPONSIBLE LOCAL AGENT**

(required if owner resides > 50 miles from Milan)

*Property owners may designate a Responsible Local Agent. Owners who reside more than 50 miles from the City of Milan shall designate a Responsible Local Agent who resides or has a place of business within 50 miles of the city limits.*

Please provide contact information below for the **RESPONSIBLE LOCAL AGENT**. Both the owner and agent must sign below confirming the agent is authorized and accepts responsibility to receive scheduling notices, inspection reports, invoices, citations, and other legal documents on behalf of the owner.

**NOTE: THE CITY WILL SEND OFFICIAL NOTICES ONLY TO THE DESIGNATED AGENT AND NOT TO THE OWNER.**

**RESPONSIBLE LOCAL AGENT NAME:** \_\_\_\_\_

**ADDRESS:** \_\_\_\_\_

**CITY:** \_\_\_\_\_ **STATE:** \_\_\_\_\_ **ZIP CODE:** \_\_\_\_\_

**PHONE:** \_\_\_\_\_ **EMAIL:** \_\_\_\_\_

I, \_\_\_\_\_, hereby authorize and appoint \_\_\_\_\_,

*who lives or has a place of business within Fifty (50) miles of the Milan City Limits, to be responsible for rental certification for the listed property and to receive all official notices for the purpose of Rental Housing Certification.*

➔ \_\_\_\_\_

Owner's Signature Designating an Agent

Printed Name

Date

➔ \_\_\_\_\_

Designated Agent's Signature

Printed Name

Date

**SECTION G: OWNER'S CERTIFICATION**

I hereby certify that all statements and information provided on this form are true, complete, and accurate to the best of my knowledge. I agree to give proof of the information that I have given on this form upon official request.

➔ \_\_\_\_\_

Owner's Signature

\_\_\_\_\_

Date

Thank you for registering your rental property. You will be notified of your biennial inspection dates in the near future.



