



RESIDENTIAL RENTAL PROPERTY PERMIT APPLICATION

City of New Port Richey
Billing and Collections Department
City Hall, 5919 Main Street
New Port Richey, FL 34652
Phone: (727) 853-1061 Fax: (727) 853-1245

Permit Fee: \$50.00 per Rental Property

Please complete the following information in full. Return the completed application along with the annual permit fee to the above address. Rental Permits are issued for a calendar year (January 1st through December 31st).

PLEASE PRINT OR TYPE

PROPERTY OWNER INFORMATION: Exempt from Public Record: Yes No

Name	_____		
Mailing Address	_____		
	City _____	State _____	Zip _____
Email Address	_____		
Home Phone	_____	Business Phone	_____

AGENT OR PROPERTY MANAGER INFORMATION:

NOTE: Local representative must have a local address in the surrounding counties (not a public P.O Box or any other private mail service).

Name	_____		
Mailing Address	_____		
	City _____	State _____	Zip _____
Email Address	_____		
Home Phone	_____	Business Phone	_____



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Email Address	_____		
Home Phone	_____	Business Phone	_____

PROPERTY INFORMATION

Property Address(es) <i>Only list addressed within City limits</i>		Single Family	Duplex	Triplex	Number Of Units
1.		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
2.		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3.		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
4.		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
5.		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
6.		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
7.		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
8.		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
9.		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
10.		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Additional properties listed on separate sheet of paper or on the back of this form? Yes No

Are properties connected together? Yes No

APPLICANT'S ACKNOWLEDGEMENT

I acknowledge that I am the property owner or owner's legal agent and that the information given in this application is complete and accurate and I understand that to make false or fraudulent statements within this application may result in a denial of the permit and possible legal action. If granted a permit, as the Owner or Legal Agent I agree to operate within the city and state laws, and to provide notification within ten (10) days to the Billing & Collections Department of any changes to the information provided on this form. I also acknowledge receipt of the City's Minimum Housing Codes for the Residential Rental Compliance Ordinance.

Printed Name _____

Signature _____

Title _____

Date _____

OFFICE USE ONLY

Application Taken By: _____ Date: _____

Application Processed By: _____ Date: _____