



**DEPARTMENT OF
COMMUNITY DEVELOPMENT**
290 North 100 West, Logan, Utah 84321
435-716-9230 office
435-716-9001 fax
www.loganutah.org

Type:
 Good landlord certified (Certify date: _____) - \$10
 Not good landlord certified at the time of application - \$50

LANDLORD BUSINESS LICENSE APPLICATION

License No. _____

For landlords with one or more rental dwellings in Logan city limits.

A separate application must be completed for each individual, ownership group, or business entity.

Date Received _____

SECTION I: Licensee Information

A. Property Owner(s): _____
 (the individual(s), ownership group, and/or business entity as recorded with the County Recorder)

B. Owner Contact

This owner / member of the ownership entity resides in the State of Utah.

Legal Name: _____

Contact Phone 1: _____ cellular home business
 Contact Phone 2: _____ cellular home business

Street Address: _____
 House number and street (include unit #, as applicable) / City, State, Zip same as "Street Address"

Mailing Address: _____
 Street / PO Box Address (include unit #, as applicable) / City, State, Zip use this address for all correspondence

C. Agent Contact

This agent for the owner / ownership entity resides in the State of Utah and is authorized by the owner for service of process.

Legal Name: _____ Organization: _____ n/a

Contact Phone 1: _____ cellular home business
 Contact Phone 2: _____ cellular home business

Street Address: _____
 House number and street (include unit #, as applicable) / City, State, Zip same as "Street Address"

Mailing Address: _____
 Street / PO Box Address (include unit #, as applicable) / City, State, Zip use this address for all correspondence

SECTION II: Rental Dwelling Units (Please list all rental dwellings and locations owned or managed by the aforementioned landlord.)

#	County Tax ID #	Rental dwelling address (include only one street address per line)	Suite #(s) and/or Names	Acreage Size *	# Units Occupied **	Total # Parking ***
1	Example: 04-079-0210	290 North 100 West	1 - 3 / Main, Rear, Bsmt	.35	2	3
1						
2						
3						

See attached page(s) for additional properties

SECTION III: Owner Certification

I certify that (i) I am the owner, a shareholder, a member and/or manager (in the case of an LLC), and/or partner of the ownership entity of the above-listed rental dwellings, and (ii) to the best of my knowledge or belief, the use and occupancy of the rental dwelling(s) conforms to applicable ordinances.

Owner Signature _____ Printed Name _____ Date _____

* Size of parcel (in units of acres or portion thereof) according to the Cache County plat. (Assessor's Office: 435-755-1590)

** Of those units listed at the rental dwelling address, the total number of units that are occupied at the time of application.

*** Total number of off-street parking spaces provided for all units at that rental dwelling address