



Rental Unit Registration Form

This form is required to be completed at the time of inspection and completely filled out. One form required for each property.

Return to Oskaloosa Development Services at: 220 South Market Street, Oskaloosa, IA 52577

Rental Property Information

Rental Property Address: [text box]

Registration Fiscal Year: [text box]

Total Number of Units in Property [text box]

Date of Last Inspection: [text box]

New registration (Y/N): [text box]

If not yet inspected, write "none".

Property Owner Information

Name: [text box]

Address: [text box]

City: [text box]

State: [text box]

Zip Code: [text box]

Phone #: [text box]

Cell #: [text box]

Email: [text box]

Property Manager Information

Name: [text box]

Address: [text box]

City: [text box]

State: [text box]

Zip Code: [text box]

Phone #: [text box]

Cell #: [text box]

Email: [text box]

Primary Contact (Property Owner/Property Manager): [text box]

As the property owner (or owner's representative), I understand that I am subject to the rental housing regulations of the City of Oskaloosa, including but not limited to the right of the City to perform inspections on my property as part of the rental housing requirements. I understand that it is my duty to notify my tenants of any upcoming inspections and to either be present or have a representative, that is at least 18 years age, present during the inspection. By my signature below, I am certifying that the rental units identified in this form comply with building regulations identified in Oskaloosa Municipal Code, Chapters 8, 15, and 17, as summarized in Attachment A: Rental Housing Inspection Checklist.

Signature: [text box]

Printed Name: [text box]

Date: [text box]

Official Use Only

Date Received: [text box]
Received By: [text box]

Registration fees paid when the completed inspection form is submitted and the Rental Compliance Certificate is issued.