SALT LAKE CITY CORPORATION Application for Landlord/Tenant Program

A. Owner Information: Name: _____ Home Phone: ___ Address:___ (City) (State) (Zip) _____Drivers License/ID No:______St____ Email: Where do you want the yearly renewal(s) mailed: Owner _____ or Management Co. _____ **B. Management Information:** Company Name: Contact Name: Drivers License/ID No: St (Zip) Management Email (Required):______Phone____ C. Property Information: Please identify all rental dwelling properties you own/manage that are in Salt Lake City. Please add additional sheets if necessary. SLC License # Location # of Units 1. 2. 3. 4. 5. D. Program Requirements: Management Agreement: I have read and understand the requirement outlined in the management agreement. I have signed the agreement and have included it with my application. □ Landlord Training Course: I agree to take the required training course within six (6) months of making this application. hereby make application for participation in the Salt Lake City Landlord/Tenant Initiative. I agree to comply with all the conditions outlined in the management agreement. I understand that my failure to comply with the requirements of the program, or if I fail to take the required training course within six (6) months, that all non-discounted fees will get applied to my license and I will be re-billed for the full non-participation licensing fees. Signature______ Date _____