



Owner Name:
Mailing Address:
City/St/Zip:

RE: Property Address:
TMS#

RESIDENTIAL RENTAL PROPERTY REGISTRATION

Please remit payment along with this completed registration form. The required license fee is \$50 per rental unit per year. Payments received after **APRIL 15TH** will be assessed a late penalty fee of 5% per month. Refer to the enclosed Chapter 11 – Rental Property Registration and Regulations which can also be accessed on our website @ www.townofirmosc.com.

Owner Name _____

Mailing Address (if changed) _____

Email Address _____

Phone Number _____

Rental Property Address _____

Renter Name _____

Phone Number _____

Management Company _____

Address _____

Phone Number _____

Owner Signature: _____ Date: _____