



**COMMUNITY AND ECONOMIC DEVELOPMENT DEPARTMENT  
INSPECTIONS DIVISION**

Inspections Division • 1528 Third Avenue Rock Island, IL 61201 • (309) 732-7368  
Internet Address: <http://www.rigov.org> • Email: [Rental.Inspection@rigov.org](mailto:Rental.Inspection@rigov.org)

**R E S I D E N T I A L R E N T A L L I C E N S E A P P L I C A T I O N**

**Fees are based on number of buildings per parcel: 4 or less: \$35; 5 or more: \$110**

For Office Use Only			
Date Processed	License Fee	\$	Account No.

- All licenses expire on March 1. Renewal notices are mailed mid - January.
- Business licenses are not pro-rated and are non-transferable. The full fee is due if the property is rented for any portion of a licensing year.
- If you change or discontinue your rental activity, you must notify the Inspections Division at (309) 732-7368.
- **License fee payment required at time of registration. Checks payable to City of Rock Island.**

**Section 1 Property Information**

Rental Property Address: \_\_\_\_\_

Number of Rental Units: \_\_\_\_\_ Dwelling Units \_\_\_\_\_ Rooming Units \_\_\_\_\_

	<b>Chap. 4, Art. VIII, Sec. 4-176. Definitions</b>
Dwelling Unit:	A single unit providing complete, independent living facilities for one or more persons, including permanent provisions for living, sleeping, eating, cooking and sanitation
Rooming Unit:	A room rented or leased as sleeping and living quarters, but without cooking facilities and with or without an individual bathroom. In a suite of rooms without cooking facilities, each room, which provides sleeping facilities, shall be counted as one rooming unit for the purposes of this article.

**Section 2 Owner Information**

**Business Name:** \_\_\_\_\_  
(Required if applicable)

**Name of Natural Person:** \_\_\_\_\_  
(Chief Operating Officer/Owner)

**State Driver's License/ ID.:** \_\_\_\_\_  
(Required)

**Daytime Phone:** (     ) \_\_\_\_\_ **Evening Phone:** (     ) \_\_\_\_\_

**Email Address:** \_\_\_\_\_ **FAX:** (     ) \_\_\_\_\_

**Address Line 1:** \_\_\_\_\_  
(Physical Address Required)

**Address Line 2:** \_\_\_\_\_  
(P.O. Box if applicable)

**City, State, Zip Code:** \_\_\_\_\_

**Section 3 Contact Information**

**Who should we contact for business purposes, such as annual license renewal?**

- Owner as listed                       Property Manager

**Who should we contact for inspections on your property?**

- Owner as listed                       Property Agent

**Section 4**

**Property Agent (Manager, Maintenance Person, or Contract Purchaser)**

**Business Name:** \_\_\_\_\_

(Required if applicable)

**Name of Natural Person:** \_\_\_\_\_

(Chief Operating Officer/Owner)

**Daytime Phone:** (     ) \_\_\_\_\_

**Evening Phone:** (     ) \_\_\_\_\_

**Email Address:** \_\_\_\_\_

**FAX:** (     ) \_\_\_\_\_

**Address:** \_\_\_\_\_

(Physical Address Required)

**Address Line 2:** \_\_\_\_\_

(P.O. Box if applicable)

**City, State, Zip Code:** \_\_\_\_\_

**Section 5**

**Property Information**

**Is this a duplex?** Upper/Lower Units  Side by Side  (check one)

How is each unit addressed? Unit #1 \_\_\_\_\_

Unit #2 \_\_\_\_\_

**Is this a dwelling unit(s) within a townhouse, condo, or coop association?**

**Is this property 3 or more dwelling/rooming units?** (If checked completion of Building Schematic is required)

**Section 6**

**Occupant Information**

**Owner Occupied?**

**Immediate Family Occupied?**

**Applicable unit # (s)** \_\_\_\_\_

**Student Rental?**

**Number of Rooms** \_\_\_\_\_

**Section 7**

**Important Information**

Sec 4-178:

The code official may, at any time, require additional relevant information of the owner or property manager to clarify items on the application for license. Whenever there is a change in ownership of a rental residential property or the owner's property agent, the owner shall, within thirty (30) days of such changes, file an updated written notice with the code official indicating such changes

Sec 4-179:

Upon receipt of a completed application form and payment of the license fee for a rental residential property license, the code official shall issue a temporary license and schedule an initial inspection of the property as soon as is practicable after submittal of the license application. The initial inspection shall determine whether the rental residential property is in conformance with the city's ordinances and all other applicable provisions of this article and/or other applicable codes.

Sec 4-182:

If the property owner changes his address or changes the property agent and fails to notify the code official, all notices and invoices shall be sufficient if sent by first class or certified mail to the owner or the property agent's last address provided on the last license application.

**Section 8**

**Owner's Signature**

I understand that this license expires on March 1 and cannot be transferred to another property, or to another owner. I also understand that if there is any change in property ownership, owner address, or agent/contact information that I MUST NOTIFY the Inspections Department within 30 days of the change.

I understand that if I receive notice and fail to make repairs, the sale of the property will not relieve me of the responsibility for repairs as ordered by Code Official. I understand that repairs may require permit(s) and if so, I will obtain permits and call for inspections as required. I UNDERSTAND THAT ALL WORK MUST CONFORM TO THE CODES OF THE CITY OF ROCK ISLAND AND THAT LICENSED CONTRACTORS UNDER PERMIT MUST COMPLETE PLUMBING, ELECTRICAL, OR HEATING/AC WORK.

I certify and declare that the information furnished by me on this application is true and complete to the best of my knowledge. I understand that the issuance of this license is conditioned upon compliance at all times with all applicable ordinances, regulations and statues of the City of Rock Island and the State of Illinois.

**X**

**Date:** \_\_\_\_\_

\_\_\_\_\_  
**Owner's Signature**