



APPLICATION FOR THE CITY OF SYRACUSE RENTAL REGISTRY CARD
FOR PARTNERSHIPS
(See last page for directions and fee schedules)

Location of the Rental Property:

Applicant's Name, Address and Connection to the Rental Property:

Name of the Owner:

d/b/a (If applicable):

Address of the Owner's Principal place of Business:

Telephone #: _____ Cell #: _____ Fax #: _____ E-mail: _____

Address: _____

Is the owner registered with the New York Secretary of State? Yes _____ No _____

If the answer is no, please provide the State in which the owner is registered: _____

Is the owner authorized to do business in New York State? Yes _____ No _____

Please mark the appropriate description of the partnership: General _____ Limited _____ Limited Liability _____

Please Provide the number of partners: _____

In the space provided below please list the name, address, phone number, and the duties and responsibilities of each officer with respect to the rental property. If you require additional space to provide the requested information please attach a separate sheet to this application.

If the owner is outside of Onondaga County or an adjoining County please provide the name, address, and telephone number of a responsible person for the owner who resides within Onondaga County, and identify this person's duties and responsibilities with respect to the rental property.

Name(s) of the Responsible Person(s):

Address of the Responsible Person(s):

Telephone #: _____ Cell #: _____ Fax #: _____ E-mail: _____

Is the property manager a licensed real estate broker? Yes _____ No _____

If yes, identify the Real Estate Agency:

Duties and Responsibilities of Responsible Person:

Do you have a property manager for the rental property?: Yes _____ No _____

Property Manager's Name: _____

Address of the Property Manager: _____

Telephone #: _____ Cell #: _____ Fax #: _____ E-mail: _____

Is the property manager a licensed real estate broker? Yes _____ No _____

If yes, identify the Real Estate Agency:

Is the property occupied or vacant? _____

How many structures are on the lot? _____

Single family or Two family structure? _____ How many are occupied? _____

Provide the number of units by stories: Basement/Cellar _____ 1st Floor _____ 2nd Floor _____ 3rd Floor _____

Is there an attic? Yes _____ No _____

Are there any auxiliary buildings? Yes _____ No _____ If yes, identify with an **X** which of the following describes the auxiliary buildings at the rental property: 1 Car Garage _____ 2 Car Garage _____ 3 or more Car Garage _____ Shed _____

I, _____, hereby apply for the City of Syracuse Rental Registry Card and authorize the required inspection of the rental property at _____ in the City of Syracuse, New York. I hereby certify that the information submitted in this application is true and accurate to the best of my knowledge.

On this _____ day of _____, 20____, before me, the undersigned, personally appeared _____, personally known to me or proved to me on the basis of satisfactory evidence to the individual whose name is subscribed to the within instrument and acknowledge to me that he executed the same, in his capacity, and that by his signature on this instrument, the individual, or person upon whose behalf the individual acted, executed the instrument.

Date: _____ Print Name: _____ Signature: _____

Notary Public

FOR OFFICE USE ONLY

Check or Money Order Number: _____

Accepted by: _____

Directions:

This Application must be filled out in its entirety, if a particular item is not applicable please indicate that in the space provided by writing “not applicable” or “N/A”.

Please note that Section 27-133 of the Property Conservation Code of the City of Syracuse requires that all addresses submitted be physical addresses, no post office boxes will be accepted. Failure to complete the form in its entirety will result in the rejection of your application and require you to submit a new application. The signature of the owner should be notarized.

A copy of the Partnership Agreement is required to be submitted with this application pursuant to Section 27-133 E of the Code. Failure to submit these documents may result in rejection of your application.

If you have any questions while completing this application, please contact the Rental Registration Office at (315) 448-4700.

Fee Schedule:

One Family Non-Owner
Occupied Dwellings: \$ 75.00 application fee

Two Family Non-Owner
Occupied Dwellings: \$ 125.00 application fee

Payments should be made by either a check or money order made payable to:
COMMISSIONER OF FINANCE, and submitted with this application to the Division of Code Enforcement, the Rental Registry Unit, 201 East Washington Street- Room 400, Syracuse, New York 13202-1430. Upon receipt of your completed application and fee, a representative of the Division of Code Enforcement will contact you to schedule an inspection of your property. Once the inspection is completed, the Rental Registry will be good for three years from the date it is issued. Your fee will cover this three year period.

Please note the following Important Information:

FIRE PROTECTION SYSTEMS

As per New York State Codes, smoke alarm requirements for existing buildings in the City of Syracuse, effective January 1, 2002, is as follows:

One & Two Family Dwellings

Battery or A.C. (hard wired) powered smoke alarms shall be located in all sleeping areas and adjacent to all sleeping areas; and on each level of the dwelling (including common basements, corridors/halls, stairs etc.)

Effective February 22, 2010, Carbon Monoxide alarms are required to be installed on the lowest story having a sleeping area.