

VILLAGE of MAYWOOD
COMMUNITY DEVELOPMENT DEPARTMENT
40 Madison Street. Maywood, IL. 60153
PH: (708) 450-4405 FAX: (708) 450-4893
www.maywood-il.org



OFFICE USE ONLY
Date Filed _____
Reg. No. _____

LANDLORD REGISTRATION APPLICATION

PROPERTY IDENTITY

Property Address: _____

Property Description:

- Single Family Residence
- Multi-Family Residence
- Mixed Use

- Commercial (Type) _____
- *Use of basement _____

Number of Units:

- 1 - 6 Unit Structure
- 7 - 20 Unit Structure
- 21 + Unit Structure

TOTAL NUMBER OF UNITS: _____

PROPERTY OWNER INFORMATION

Property Owner: _____ Owner Telephone # _____

Owner Address: _____ City/State/Zip Code: _____

Mailing Address: _____ City/State/Zip Code: _____

E-Mail Address: _____ Owner Fax Number _____

PROPERTY MANAGEMENT INFORMATION

Property Manager: _____ Manager Phone # _____

Manager Address: _____ City/State/Zip Code: _____

Mailing Address: _____ City/State/Zip Code: _____

E-Mail Address: _____ Manager Fax Number _____

The undersigned acknowledges that this property is a residential unit. This information is required by the Landlord Ordinance from our Village of Maywood Code Section 150.100 (B) and all said owner(s)/agent(s) are responsible for registration of their properties by December 31st of every year. The Community Development Office should be notified each time the property changes ownership, or the property management arrangement changes. Failure to comply with this ordinance shall result in a penalty against landlord or said owner of this aforementioned property per Maywood Code Section 150.098 (D) 2 (b).

Applicant Signature

Date

Received By

Date

White - FILE

Yellow - APPLICANT

Pink - FINANCE