



115 South Main Street · P.O. Box 389 · Webberville, MI 48892 · Ph: 517-521-3984 · Fax: 517-521-3165

Date: _____

Permit: _____

RENTAL APPLICATION – MULTIPLE

Property address _____

Property ID _____

Owner's Name _____

Drivers Lic. # _____

If LLC President or Chief Executive Officer Name, phone number, address and drivers lic required.

Mailing address _____

Tenants name and phone #'s attach additional sheet if needed.

City	State	Zip Code
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Phone Number _____

Number of Buildings	Number of Units	Address
#1 _____	_____	_____
#2 _____	_____	_____
#3 _____	_____	_____
#4 _____	_____	_____
#5 _____	_____	_____
#6 _____	_____	_____

**Fees for Apartment/ Multi Unit Complex \$100 each unit.
Duplex fees are \$200.00 per duplex**

I acknowledge that the information contained in this application is true. Per Village Ordinance, I understand that all rental properties located within the Village of Webberville are required to be registered every three years and failure to register would constitute a violation of Village Ordinances.

Name Printed _____

Signature _____