



City of North Mankato
1001 Belgrade Ave
North Mankato, MN 56003
507.625.4141

PROPERTY AGENT UPDATE FORM

RENTAL PROPERTY ADDRESS: _____
(Only 1 address per application. Duplicate this page if needed)

NUMBER OF RENTAL UNITS AT THIS ADDRESS: _____

ZONING DISTRICT: _____
Contact the City if you do not know the zoning district

NEW PROPERTY AGENT, EFFECTIVE AS OF: _____
(Date)

North Mankato City Code requires a local agent if owner does not live within a 30-mile radius of the city as measured from the Veterans Memorial Bridge.

NAME OF AGENT: _____
(If other than owner) (Company Name) (Contact Name)

MAILING ADDRESS: _____
(Street Address – NO P.O. Box) (City) (State) (Zip)

(Cell Phone) (Work Phone) (Home Phone)

(E-mail)

If the property is located in an R-1 or R-2 district, the occupancy of the property is limited to family-traditional or family-functional. Other types of occupancies are not allowed in the R-1 & R-2 districts. (see definitions below)

1. Family-traditional. A traditional family means one or more persons related by blood or marriage residing in a single dwelling unit.
2. Family-functional. A functional family means a collective group of unrelated persons residing in a single dwelling unit, limited to not more than two adult persons, together with their traditional family members of any age.

I have read the above and understand the occupancy limits associated with this property _____
Agent or Owner Initials

Please read the statement below, initial, sign and date.

I hereby grant permission to the City of North Mankato to make inspections of the structure listed herein to determine its compliance with all applicable codes. I agree to maintain a clean, safe, sanitary residential dwelling. I understand that my failure to comply with these requirements may result in a monetary fine or revocation of the license. **I hereby certify that the agent listed herein is authorized to receive correspondence, license renewals, summons and complaints on behalf of the owner. The owner and/or agent agree to promptly notify the City of any change in tenant occupancy, change of agent or transfer of ownership.**

Applicant's Initials

I hereby certify that all information contained herein is true and accurate.

Agent or Owner Signature _____ **Date** _____

Agent or Owner Printed Name _____