



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

RESIDENTIAL RENTAL LICENSE APPLICATION
SHORT-TERM RENTAL

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

OWNER NAME:
(First) (MI) (Last)

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

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

(E-mail)

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)

How many off-street parking stalls are currently available at the property? :
A minimum of 2 compliant off-street parking spaces will be required for each unit. All off-street parking spaces shall be hard-surfaced. If there is a garage on the property and is counted as part of the 2 off-street parking spaces, the garage must be made clear and available for tenants to park a vehicle(s) inside.

For One and Two-Family Dwellings in R-A, R-1, R-1S and R-2 zoning districts off-street parking spaces shall be provided for each dwelling unit based on the following ratio of square footage of sleeping rooms to required parking stalls

Table with 2 columns: Sleeping Rooms Square Footage, Parking Stalls. Rows include ranges like 70 to 119, 120 to 169, 170 to 219, 220 to 269, and 270 and greater.

For a one-family dwelling, not less than two off-street parking stalls shall be provided and not more than five off-street parking stalls shall be required. For a two-family dwelling, not less than four parking stalls shall be provided and not more than ten parking stalls shall be required.

Requirements for all Applications

The following items must be submitted with the application:

Floor plan – minimum size 8 ½ x 11. Identify all rental units by number. All bedrooms and their size must be identified.

Site Plan – minimum size 8 ½ X 11. Identify all existing parking spaces on the property.

Payment – \$50.00 Application Fee (non-refundable) will be required with this application. (License fees and completed tenant list will be required after the property passes final inspection and before any license is issued.)

****Meter** – In accordance with Ordinance No. 154, Section 151.21 Water Meters

All properties required to obtain a residential rental license must obtain and install automatic read meters. If the property does not comply with these provisions, the rental license shall not be issued, and if a rental license has been issued, it shall not be renewed. The property shall not qualify for a new or renewed rental license until it complies with the provisions of this code section.

Carefully read the statements below, initial where required, and 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 (if any) 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 understand it is my responsibility to contact a city inspector **within twenty (20) days** from the date of application to schedule the initial inspection of the property. _____

Applicant's Initials

I understand that failure to complete any necessary code requirements **within the time-frame issued by the Inspection Official** will result in this application being withdrawn and voided. _____

Applicant's Initials

I understand that payment made with this application has been submitted for the purpose of applying for a rental license and that such submittal does not constitute an automatic granting of a rental license. I also understand that the application fee will not be refunded if a rental license is denied due to failure of the property to comply with all applicable codes. _____

Applicant's Initials

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

Applicant's Signature _____ **Date** _____

Applicant's Printed Name _____

OFFICE USE ONLY

Date Application Received: _____ Floor Plan Site Plan

Application Fee: _____ Receipt # _____

Inspections

Initial Inspection Completed on: _____

Corrections Due By: _____

Final Inspection on: _____

License Fees and Issuance

of Units x \$45.00 per Unit = _____

License Fees Paid: _____ Receipt # _____

License # Issued: _____

Tenant List

This sheet must be completed and submitted with the application.

Rental Property Address: _____
(Only 1 address per application. Duplicate this page if needed)

Zoning District: _____

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.

151.20 REQUIRED TENANT OCCUPANCY

(A) In no event shall a property owner make application for a rental license without the intent of renting the dwelling(s). In no circumstance will a rental license be issued without the owner first submitting a tenant list documenting who will reside in rental property.

I have read the above and understand the occupancy limits associated with this property _____
Applicant's Initials

Number of Rental Units for this Address: _____

Rental Unit # _____ Check here if this unit is currently vacant of any tenants
Check here if this unit is owner occupied

Total # of Persons in unit: _____ # of Children in unit under age 18: _____

<u>Names of All Adults in unit – both first and last name</u>	<u>Phone #</u>
_____	_____
_____	_____
_____	_____
_____	_____

Rental Unit # _____ Check here if this unit is currently vacant of any tenants
Check here if this unit is owner occupied

Total # of Persons in unit: _____ # of Children in unit under age 18: _____

<u>Names of All Adults in unit – both first and last name</u>	<u>Phone #</u>
_____	_____
_____	_____
_____	_____
_____	_____

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_____	_____
_____	_____
_____	_____
_____	_____