## **Rental Permit**



## City of Oelwein 20 2nd Ave. SW Oelwein, Iowa 50662 (319) 283-5440

CITY ISSUED I	LICENSE NUMBER:			_
(PLEASE PRINT)				
Legal Owner Information:		Phone #:		
Address:				
Street	City	Sta	ate	Zip
Email Address:		Secondary #:		
SSN:	OR TAX ID#			
	(Second Owner If Appli			
Billing Information Check if same as ab				
Legal Owner Information:		Phone #	#:	
Address:				
Street	City	State	Zip	
Email Address:		Second	ary #:	
Contact Name/Registered Agent:_  Business Address:  Phone #			ax ID #:	
Email Address:				
Pursuant to Chapter 25 of the City of Oel- Permit to lease, rent or otherwise allow a Permit information change, the City of Oe (30) calendar days after the change occur provisions of this chapter or to falsify any denial of this Permit. Fees, Fines and Per and shall be submitted at the time of ap Applicant	a dwelling unit or rental unit to be elwein must be notified in writing or rs unless prior arrangements are m y information on this application malties will be assessed in accordan	occupied for rental   or by re-submitting o ade with this office. ay result in the revo	purposes. Shoof this form we Failure to co ocation, suspe	ould any vithin thirty omply with th ension or
Signature:		Date:_	mm/dd/yy	
			mm/dd/yy	ууу
APPLICATION RECEIVED:	OFFICIAL USE ONLY APPLICATION APPROVED: Y / N IF	not, Why		
License Officer Signature:		Date:		