



CITY OF BEREA
11 Berea Commons, Berea, Ohio 44017
(440) 826-5812

2009 LEASING PERMIT APPLICATION

October 1, 2009– September 30, 2010

Section 201.05 – Berea Zoning Code

Application/Inspection Fee: \$100

OWNERSHIP INFORMATION:

Address of Leased Property: _____

Owner of Property: _____ Phone:(____) _____

E-mail Address: _____

Mailing Address of Owner:

Agent (if any): _____ Phone:(____) _____

Do you own other properties in the City of Berea? [] Yes [] No

If yes, please list other property addresses you own in Berea: _____ [] if leased property;

_____ [] if leased property; _____ [] if leased property

If more space is required, please attach additional addresses of property you own on a separate sheet of paper

LEASED PROPERTY INFORMATION:

Are you current on your water bill for the property you intend to lease?

[] Yes [] No (if NO what is the amount due _____)

Note: a leasing permit may be denied to any property owner that is past due on water bills.

A Leasing Permit is required: except where the owner resides in the dwelling unit, no owner, renter, tenant or regular occupant of any single family or two family dwelling shall rent, lease or regularly occupy a dwelling unit without first obtaining a Leasing Permit.

Owners may be cited for failing to apply for a permit. Tenants may be cited for occupying the dwelling without a leasing permit. Either party, upon conviction, is guilty of a misdemeanor of the fourth degree.

The owner is required to provide the names of the tenants, the number of tenants that will occupy the dwelling, the number of motor vehicles regularly used by the prospective tenants, and the make, model and license plate numbers of all vehicles regularly parked in the off-street parking area that is the subject of the Leasing Permit.

The City of Berea Building Department will inspect each dwelling unit to determine whether the unit is of adequate size for the proposed number of occupants; and whether the off-street parking area is adequate to accommodate the proposed number of motor vehicles; and whether the unit and its exterior comply with the Exterior Property Maintenance Code; and whether the unit satisfies the provisions of Part Thirteen of the Codified Ordinances of the City of Berea.

A leasing permit is valid from the date of issuance to September 30 of each year. Owners are required to obtain a permit every year. Inspections are conducted every other year. Properties in Ward 2 and Ward 3 are subject to inspection in even-numbered years. Properties in Wards 1, 4 and 5 are subject to inspection in odd-numbered years.

PLEASE READ AND SIGN BELOW:

[] CHECK HERE IF THIS PROPERTY IS NOT A LEASED PROPERTY

This is not a leased property due to the following reason(s): (please check all that apply)

- [] I own and reside at the referenced property.
[] Other (please state reason): _____

I certify that the information given herein is true and complete to the best of my knowledge.

I realize that any false or misleading information may subject me to prosecution under Ohio Revised Code Section 2921.13.

Signature of Owner(s) Date
Address of subject property: _____

(Please see reverse side to complete tenant information)

OVER



No. of Dwelling Units: _____

No. of Off-Street Parking Spaces Available: _____

INDIVIDUAL TENANT INFORMATION – UNIT 1
(REQUIRED)

No. of Bedrooms: _____ No. of Tenants: _____

TENANT'S NAME: _____ Phone: (____) _____

Vehicle: Year: _____ Make: _____ Model: _____ License Plate No.: _____

TENANT'S NAME: _____ Phone: (____) _____

Vehicle: Year: _____ Make: _____ Model: _____ License Plate No.: _____

TENANT'S NAME: _____ Phone: (____) _____

Vehicle: Year: _____ Make: _____ Model: _____ License Plate No.: _____

TENANT'S NAME: _____ Phone: (____) _____

Vehicle: Year: _____ Make: _____ Model: _____ License Plate No.: _____

(IF MORE THAN ONE DWELLING UNIT, PLEASE COMPLETE THIS BOX AS WELL)

INDIVIDUAL TENANT INFORMATION – UNIT 2
(REQUIRED)

No. of Bedrooms: _____ No. of Tenants: _____

TENANT'S NAME: _____ Phone: (____) _____

Vehicle: Year: _____ Make: _____ Model: _____ License Plate No.: _____

TENANT'S NAME: _____ Phone: (____) _____

Vehicle: Year: _____ Make: _____ Model: _____ License Plate No.: _____

TENANT'S NAME: _____ Phone: (____) _____

Vehicle: Year: _____ Make: _____ Model: _____ License Plate No.: _____

TENANT'S NAME: _____ Phone: (____) _____

Vehicle: Year: _____ Make: _____ Model: _____ License Plate No.: _____