

**CITY OF GRAFTON
RENTAL REGISTRATION PROGRAM
CERTIFICATE OF USE AND OCCUPANCY APPLICATION**

INITIAL _____
RENEWAL _____

1. _____ 2. _____
Dwelling Unit Street Address

3. If Multi-Unit in structure: Dwelling Unit No.: _____ floor(s) _____

4. Total Dwelling Units in structure: _____

5. Number of Occupants in Unit: _____

6. Off-Street Parking Spaces for Units: _____

7. Zoning District: _____

8. Owner:

Name: _____

Address: _____ Area Code/Phone: _____
P.O. Box or Street Home

City State Zip Code Work

9. Notify in case of emergency

Owner: _____

Name: _____

Address: _____
P.O. Box or Street

City State Zip Code

Area Code/Phone No.: _____
Home Work

10. Notify in case of Violation:

Owner: _____

Name: _____

Address: _____

P.O. Box or Street

City State Zip Code

Area Code/Phone No.: _____
Home Work

11. Fee Submitted: _____ 12. Receipt No. _____

13. Mail Certificate To: _____

14. Inspected By: _____

CITY BUSINESS LICENSE REQUIRED (RENTAL PROPERTY \$10.00)