



# RENTAL DWELLING LICENSE APPLICATION

Community Development Dept. • 55 South State Street • Clearfield, UT 84015  
Phone: (801) 525-2781 • Fax: (801) 525-2865 • [www.clearfieldcity.org](http://www.clearfieldcity.org)

## RENTAL DWELLING LICENSE INFORMATION

**License Status** (check all that apply):  New License  Name Change  Ownership Change  
**State Registration:**  DBA  Sole-Proprietor  Limited Liability  Corporation  
 Non-Profit  Partnership

**APPLICATION DATE:** \_\_\_\_\_

**RENTAL LICENSE NAME:** \_\_\_\_\_ **DBA:** \_\_\_\_\_

Has this name been registered with the State of Utah, Commerce Department?  Yes  No **Registration #:** \_\_\_\_\_  
If using a business name, please apply at <http://www.business.utah.gov/registration>. Registration is not required if using first and last name.

**RENTAL LOCATION:** Address: \_\_\_\_\_ Unit #: \_\_\_\_\_

If licensing more than one property, please list the additional rental properties on the second page of this application.

**CONTACT/MAILING INFO:** Address: \_\_\_\_\_ Suite #: \_\_\_\_\_  
City, State, Zip: \_\_\_\_\_  
Contact Person Name: \_\_\_\_\_ Phone: \_\_\_\_\_  
Contact Email Address: \_\_\_\_\_

## IF APPLICANT IS A SOLE-PROPRIETOR, PLEASE COMPLETE THIS SECTION

Owner Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_  
Owner Address: \_\_\_\_\_ Driver's License #: \_\_\_\_\_ State: \_\_\_\_\_  
City, State, Zip: \_\_\_\_\_  
Primary Phone: \_\_\_\_\_ Alternate Phone: \_\_\_\_\_  
Email Address: \_\_\_\_\_

## IF APPLICANT IS A CORPORATION/PARTNERSHIP/LIMITED LIABILITY, PLEASE COMPLETE THIS SECTION:

Corporate Name: \_\_\_\_\_  
Corporate Officers/Partners/Members: 1. \_\_\_\_\_ 2. \_\_\_\_\_  
3. \_\_\_\_\_ 4. \_\_\_\_\_  
Corporate Address: \_\_\_\_\_  
City, State, Zip: \_\_\_\_\_  
Licensing Officer/Contact Name: \_\_\_\_\_ Phone: \_\_\_\_\_  
Email Address: \_\_\_\_\_

## APPLICANT'S AGREEMENT

These forms including any supplemental applications are for a rental dwelling license. The actual license will be issued only when the licensee is found to be in compliance with all local, state, and federal building codes and zoning ordinances and all inspections are completed and approved by the necessary City departments. Missing or incomplete information on this application may significantly increase approval time.

It is unlawful for any person to engage in business within the city without first obtaining a license. (Clearfield City Code 4-1-4)

Business licenses (and Rental Licenses) shall not be transferred from one person to another. (Clearfield City Code 4-1-12)

I, the undersigned, hereby agree to conduct said business strictly in accordance with all Clearfield City codes governing such business, and swear under penalty of law that the information contained herein is complete, truthful and accurate to the best of my knowledge and current belief. I understand that to falsify any information on this application is grounds for denial and/or revocation of this license and other penalties as provided by law. I also acknowledge the responsibility to renew the Clearfield City business license, which shall be valid for a period of twelve months from the date of issuance, and must be renewed on an annual basis to remain valid. If the renewal fee, plus any disproportionate fee due, is not paid within 45 days after expiration, a penalty fee of 50% of the total amount due shall be imposed and shall become part of the license fee.

**Applicant Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Please Print Your Name:** \_\_\_\_\_

## ADDITIONAL INFORMATION FOR RENTAL DWELLING LICENSE

**NEW RESIDENTIAL RENTAL LICENSE FEE:**

Good Landlord Participant \$30.00 or Non Participant \$190.00: \$ \_\_\_\_\_

**DISPROPORTIONATE SERVICE FEE:**

**Good Landlord Participant**

Single-Family Units / \$7.00 per X \_\_\_\_\_ unit(s): \$ \_\_\_\_\_

Duplex Units / \$3.00 per X \_\_\_\_\_ unit(s): \$ \_\_\_\_\_

3/4 Plex Units / \$9.00 per X \_\_\_\_\_ unit(s): \$ \_\_\_\_\_

Multi-Family Units / \$7.00 per X \_\_\_\_\_ unit(s): \$ \_\_\_\_\_

Mobile Home Units / \$7.00 per X \_\_\_\_\_ unit(s): \$ \_\_\_\_\_

**Non Good Landlord Participant**

Single-Family Units / \$66.50 per X \_\_\_\_\_ unit(s): \$ \_\_\_\_\_

Duplex Units / \$12.50 per X \_\_\_\_\_ unit(s): \$ \_\_\_\_\_

3/4 Plex Units / \$92.00 per X \_\_\_\_\_ unit(s): \$ \_\_\_\_\_

Multi-Family Units / \$67.00 per X \_\_\_\_\_ unit(s): \$ \_\_\_\_\_

Mobile Home Units / \$49.50 per X \_\_\_\_\_ unit(s): \$ \_\_\_\_\_

**TOTAL DUE: \$ \_\_\_\_\_**

Please attach a copy of the **Property Information Form & Fit Premises Questionnaire** for each rental dwelling unit.

I have been informed of the Good Landlord Program and I DO \_\_\_\_\_ or DO NOT \_\_\_\_\_ wish to participate at this time.

Applicant's who desire to participate in the city's good landlord program shall also complete and submit the Good Landlord Program Agreement. (A copy of this agreement can be obtained in the Community Development Department.)

New applicants of the Good Landlord Program must obtain and submit a copy of the certificate showing attendance and completion of the Good Landlord training. This must be submitted to our office within 6 months of approval.

CERTIFICATE #: \_\_\_\_\_ DATE OF ATTENDANCE: \_\_\_\_\_ LOCATION OF CLASS: \_\_\_\_\_

If licensing more than one rental property, please list address and unit # below:

RENTAL LOCATION: Address: \_\_\_\_\_ Unit #: \_\_\_\_\_

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### OFFICE USE ONLY

Planning Division: \_\_\_\_\_ Approved \_\_\_\_\_ Denied \_\_\_\_\_ Date \_\_\_\_\_

Building Division: \_\_\_\_\_ Approved \_\_\_\_\_ Denied \_\_\_\_\_ Date \_\_\_\_\_

Licensing Officer: \_\_\_\_\_ Approved \_\_\_\_\_ Denied \_\_\_\_\_ Date \_\_\_\_\_

Land Use Zone: \_\_\_\_\_ Conditional Use Permit Required?  Yes  No

Site Plan Required?  Yes  No

Health Dept Approval?  Yes  No  N/A

Reason/Comments: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Receipt #: \_\_\_\_\_

Received By: \_\_\_\_\_ Date: \_\_\_\_\_

Amount: \_\_\_\_\_

Type of Payment:

Cash  Check # \_\_\_\_\_  Credit Card

License #: \_\_\_\_\_



# Fit Premises Questionnaire

License # \_\_\_\_\_

**Clearfield City**  
55 South State Street  
Clearfield, UT 84015  
Phone: (801) 525-2780 – Fax (801) 525-2865

**All dwellings must comply with the minimum standards as adopted by Clearfield City. A copy of the International Property Maintenance Code is available at the Community Development Department. Although not all inclusive, the following are some of the general requirements related to a “Fit Premise”.**

|                    |                  |            |
|--------------------|------------------|------------|
| _____              | _____            | _____      |
| Property Owner     | Property Address | # of units |
| _____              | _____            | _____      |
| Manager Name/Agent | Address          | Phone      |

**Check the appropriate box:**

- |                          |                          |                          |  |
|--------------------------|--------------------------|--------------------------|--|
| N/A                      | Yes                      | No                       |  |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | All dwelling units or guest rooms are provided with an exit leading to the exterior or a public hallway.   |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | The doors and windows are weather tight with no broken glass and the roof does not leak.   |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Every apartment building is designated by a letter or a number for easy identification and is visible from the street.                                     |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Smoke detectors are provided on the ceiling or wall at a point centrally located in the hallway or each area giving access to each separate sleeping area. |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Each of the habitable rooms in the dwelling units have at least one window which opens or is operable for light and ventilation.                           |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | The heaters or furnaces in the rental units will maintain a room temperature of 68 degrees at 3 feet above the floor in all habitable rooms.               |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | The electrical service, lights, switches, and outlets are in good repair.  |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | All sleeping rooms including any basement sleeping areas have at least one operable window or exterior door to provide emergency escape or rescue.         |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Plumbing drains and lines are operable and do not leak.  |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | There are handrails at all interior and exterior stairs with 4 or more risers.   |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | There are guardrails at all porches and landings that are over 30 inches above the ground.   |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | All dwelling units have hot and cold running water to kitchen and bathroom sinks, tubs, showers, clothes washers, etc.                                     |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | The property is clear of automobiles that don't run, trash, debris, or weeds taller than 6 inches on the property.   |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Each unit is provided with toilet facilities that work.  |

I hereby certify that to the best of my knowledge, the dwelling units listed above meet or exceed the standards represented in this questionnaire.

|       |             |
|-------|-------------|
| _____ | _____       |
| Date  | Owner/Agent |

Compliance with the above list does not guarantee full compliance with all aspects of the International Property Maintenance Code for existing structures. The owner remains responsible for understanding and complying with the code.