



**APPLICATION FOR A
RESIDENTIAL RENTAL CERTIFICATE OF
OCCUPANCY**
(PLEASE PRINT OR TYPE ALL INFORMATION)

City of North Richland Hills
4301 City Point Drive
North Richland Hills, TX 76180
(817) 427-6300
F (817) 427-6303

PART 1. RESIDENTIAL RENTAL LOCATION

Address:

_____ Unit _____

PART 2. TENANT INFORMATION:

Has property been leased? _____ Yes; _____ No.

Tenant Name _____

Telephone _____

City, State, Zip _____

Email address _____

Previous Occupant: _____

PART 3. PROPERTY OWNER INFORMATION:

Property Owner/ Mgr. Name _____

Contact _____

Mail Address _____

City, State, ZIP _____

Telephone () _____

Fax () _____

Email address _____

PART 4. CHOOSE ONE OF THE FOLLOWING:

Initial Tenant

Change of Tenant

PART 5. BUILDING DESCRIPTION **Single Family Dwelling** **Duplex** **Tri-Plex** **Four-Plex**

Number of Bedrooms: _____

Number of Occupants: _____

PART 6. MANAGEMENT COMPANY INFORMATION (If applicable):

Property Mgr. Name _____

Tel: _____

Contact _____

Email address _____

Address _____

City, State, Zip _____

NOTICE: I hereby certify that I have read and examined this application and know the same to be true and correct. All provisions of laws and ordinances governing the use of this property will be complied with whether specified herein or not. The granting of a CofO does not presume to give authority to violate or cancel the provisions of any other State or local law regulating the use of this property.

Signature of Applicant _____ Print Name _____ Date _____

****** OFFICE USE ONLY ******

Application # _____ 0000 _____

Zoning District _____

Date Application Submitted _____

Processed By (CSA) _____

Application Fee: N/A