

This form must be filled out legibility AND with all information completed.

CITY OF SIKESTON

APPLICATION FOR TENANCY

Instructions: Forward this completed form with an application fee of \$15.00 to the Sikeston Department of Public Works, Code Enforcement Office, 105 East Center Street, Sikeston, MO 63801.

STREET ADDRESS OF RENTAL PROPERTY TO BE INSPECTED _____		APT. #. _____
NAME & ADDRESS OF PROPERTY OWNER _____		
NAME OF PROPERTY MANAGER _____		PHONE NO. (____) _____
PROPERTY MANAGER'S ADDRESS _____		
DATE OF DESIRED OCCUPANCY _____ (DO NOT STATE AS SOON A POSSIBLE, PROVIDE MONTH AND DAY)		
PREFERRED CONTACT	<input type="checkbox"/> OWNER	<input type="checkbox"/> PROPERTY MANAGER <input type="checkbox"/> BOTH
PREFERRED METHOD OF CONTACT	<input type="checkbox"/> USPS	<input type="checkbox"/> EMAIL _____ (PLEASE ENTER CONTACT EMAIL ADDRESS)

HEAD-OF-HOUSEHOLD _____ PHONE NO. (____) _____

DATE OF BIRTH ____ / ____ / ____ DRIVERS LICENSE # _____

THE FOLLOWING OCCUPANTS (AND NO OTHERS) WILL BE RESIDING AT SAID RENTAL PROPERTY:

<u>NAME</u>	<u>DATE OF BIRTH</u>	<u>RELATIONSHIP TO HEAD-OF-HOUSEHOLD</u>

I CERTIFY THE ABOVE INFORMATION TO BE TRUE AND ACCURATE STATEMENTS MADE IN CONJUNCTION WITH MY REQUEST FOR A RENTAL PROPERTY MAINTENANCE INSPECTION.

TENANT(S): ALL ADULT TENANTS MUST SIGN APPLICATION. IF NECESSARY USE THE BACK OF THE FORM, PLEASE PRINT YOUR NAME AND SIGN.

Signed: _____ Signed: _____ Date: _____

PROPOSED LANDLORD/PROPERTY MANAGER:

Signed: _____ Date: _____

NOTE: UTILITIES WILL NOT BE PLACED IN OCCUPANTS NAME UNTIL CERTIFICATE OF OCCUPANCY IS PRESENTED TO BMU Form RHO-02 (Rev. 11/18 Revised)