RENTAL HOUSING INSPECTON PROGRAM REGISTRATION FORM

300 Richards Blvd, 3rd Floor • Sacramento, CA 95811 (916) 808-7368 www.cityofsacramento.gov/rhip

Please complete all information below and sign where appropriate. It is unlawful for any person to engage in the business of rental housing unless this completed registration form is provided to the City of Sacramento and the annual program fee is paid. A new registration form must be submitted not later than 30 days after a change of owner, agent or rental status. Form may be returned by mail (see mailing address above), by fax to 916-288-9955 or e-mail to RHIP@cityofsacramento.org

Please check one:					
New Registration	New/Add Local Contact	Up	date Maili	ng Address/I	Phone Number(
Rental Property Address:		Assessor's Parcel #: (As shown on property tax bill or property deed)			
otal Number of Rental Units:	·	(As snown on p	roperty tax bili	or property deed)	
Property Owner Name:					
)wner Mailing Address:					
Str	reet Name/Number	City	1	State	Zip
)wner Phone #'s (please in	<u>ıclude area code)</u> :				
Day):	(Evening):		(Cell)	:	
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Name of Individua Mailing Address: Street	al/Person C	City	Busines State	ss or Company Nam	ne (if any)
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