



CITY OF ERIE RESIDENTIAL RENTAL REGISTRATION 2020 REGISTRATION YEAR

If you have any questions please contact Kristy Williams (814) 870-1449.
All payments are to be made payable to: City of Erie.

OFFICE USE ONLY

Date: _____ GF Receipt No. _____ Payment Amount \$ _____
Check _____ Money Order _____ Cash _____ Zoning () Scan ()

_____ Zip Code _____
Rental Unit Street Address

Building name if applicable _____

Type of Structure:

___ Single Family Dwelling ___ Flat/Duplex ___ Apartment Building

Number of Rental Units: _____ Is this property insured? ___ Yes ___ No

Number of Units Per Floor:

Basement _____ First Floor _____ Second Floor _____ Third Floor _____
Fourth Floor _____ Other _____

Fee Category

Fee Per Unit

Total

Annual Fee prior to due date	\$ 40.00	\$ _____
Annual Fee up to 15 days past due date	\$ 65.00	\$ _____
Annual Fee past 15 days past due date	\$ 80.00	\$ _____
New Registration within 60 days of eligibility	\$ 40.00	\$ _____
New Registration after 60 days of eligibility	\$ 65.00	\$ _____
Annual Fee for property with two consecutive approvals	\$ 30.00	\$ _____

Exemptions:

Exempt Unit Description: _____

Exempt Unit Description: _____

Name of Occupant: _____

Name of Occupant: _____

Relationship to Owner: _____

Relationship to Owner: _____

Type: Owner ___ Family ___ Section 8 ___

Type: Owner ___ Family ___ Section 8 ___

Bureau of Code Enforcement
626 State Street Room 407
Erie, PA 16501

OWNER INFORMATION: No P.O. Boxes shall be accepted.

Business or Company Name

Owner Name

Telephone No.

Street Address

City,

State,

Zip Code

Cell Phone No.

E-Mail:

Preferred Method of Contact

RESPONSIBLE AGENT INFORMATION:

A Responsible Agent is defined as a person authorized by the owner to act in his behalf. All Responsible Agents must reside within Erie County, Pennsylvania.

- Owners of Rental Units residing in Erie County *may* designate a Responsible Agent to be named on the Registration/License.
- Owners of Rental Units residing out of Erie County **must designate** a Responsible Agent to be named on the Registration/License. : No P.O. Boxes shall be accepted.

Name

Telephone No.

Street Address

City,

State,

Zip Code

Cell Phone No.

E-Mail:

Preferred Method of Contact

Your signature attests that on this date:

1. Each dwelling unit has the appropriate number of operational smoke detectors.
2. Equipment, systems, devices and safeguards required by this code are maintained and are in working order.
3. Undersigned agrees to an interior/exterior inspection by the City of Erie or their designated official.

By your signature you acknowledge the information provided in this registration is correct and acts as a temporary license to operate. This registration does not deem the property as code compliant or habitable.

Signature _____

Date: _____

Relationship to Owner: _____