



Building and Housing Department  
 16313 Kedzie Parkway  
 Markham, Illinois 60428  
 Phone: (708) 331-4905 x314 Fax: (708) 331-9250  
 Email: [housing@cityofmarkham.net](mailto:housing@cityofmarkham.net)

**RESIDENTIAL RENTAL LICENSE APPLICATION  
 (PLEASE PRINT)**

<b>TYPE OF APPLICATION</b>	<input type="checkbox"/> New Rental Registration		<input type="checkbox"/> Change of Address/Phone		
	<input type="checkbox"/> Change of Owner/Agent		<input type="checkbox"/> Change of Tenant		
<b>RENTAL PROPERTY STREET ADDRESS:</b>			<b>P.I.N. #</b>		
<b>Do you own other rental property in Markham, Illinois?</b>			<input type="checkbox"/> YES <input type="checkbox"/> NO		
<b>If Yes, How Many?</b>		<b>Please list all addresses below (Look on next page for additional spaces)</b>			
<b>ADDRESS</b>	<b>LESSEE NAME</b>		<b># OF OCCUPANTS</b>		
<b>TYPE OF PROPERTY:</b>	<input type="checkbox"/> Single Family Home		<input type="checkbox"/> Townhome	<input type="checkbox"/> Duplex	
	<input type="checkbox"/> Apartment Building – Number of Units _____ Number of Parking Spaces associated with property _____				
<b>Legal Property Owner Information: (Street address is required, do not use PO Box information)</b>					
<b>NAME:</b>			<b>ADDRESS:</b>		
<b>E-MAIL ADDRESS:</b>		<b>CITY:</b>		<b>STATE:</b>	<b>ZIP CODE:</b>
<b>BUSINESS PHONE:</b>		<b>MOBILE PHONE:</b>		<b>HOME PHONE:</b>	
<b>24 Hour Contact Emergency Phone Number **REQUIRED**</b>					
<b>Local Agent Information: (Required for all owners not living within a 30 mile range of the City of Markham, IL)</b>					
<b>NAME:</b>			<b>ADDRESS:</b>		
<b>E-MAIL ADDRESS:</b>		<b>CITY:</b>		<b>STATE:</b>	<b>ZIP CODE:</b>
<b>BUSINESS PHONE:</b>		<b>MOBILE PHONE:</b>		<b>HOME PHONE:</b>	
<b>24 HOUR CONTACT EMERGENCY PHONE NUMBER REQUIRED:</b>					
<b>FEES:</b>	<b>Annual Registration/License Fee: (May 1 – April 30)</b>		<b>\$75.00</b>		
	<b>Bi-Annual Inspection Fee: (Once every 2 years)</b>		<b>\$125.00 – Single Family/Townhouse/Duplex          \$200 – Apartment Building          + \$25.00 each individual unit more than two (2) units. (25 x ____)</b>		
			<b>(Re-inspection fees and fines as stated in City Code (section 3-3))</b>		
\$					
<p>I, the Owner/Agent for the above property understand the issuance of this license is conditional upon compliance with all City of Markham Ordinances, State and Federal Law. I understand the submission of this application and payment of license fees does not constitute official licensing compliance with the Rental Housing Code that has been verified through inspection by authorized personnel and a permanent annual license certificate has been issued by the City of Markham. I verify that this application is complete and truthful to the best of my knowledge. I understand that renting a dwelling without a valid license issued by the City of Markham is a violation of the City of Markham Ordinance No. 17-0-2162 and will result in enforcement by fines and a court appearance; the property may be deemed uninhabitable until license is obtained.</p>					
<b>SIGNATURE</b> _____		<b>DATE</b> _____			

