



Rental Housing Inspection Certificate Application

Property Owner

Name: _____

Address (Street, City, State, Zip): _____

Phone number: _____ Email address: _____

Property Manager

Name: _____

Address (Street, City, State, Zip): _____

Phone number: _____ Email address: _____

Property Information

Address: _____

Property Type: Single Family Multi-Family Townhome/Condo/Duplex

Number of Rental Buildings: _____ Number of Dwelling Units: _____

List all buildings' addresses with building assignments (i.e., 123 NE Example Street, 1-24 or A-Z):

Please attach additional pages if needed.

Payment

PAYMENT MUST BE RECEIVED PRIOR TO RENTAL INSPECTION SCHEDULING. Please use the Fee Calculator at www.Waukee.org/rentalinspections, if needed. Inspection fees are:

- \$50 for Single Family Home
- \$50 for Individually-Owned 1 or 2 Family Condo, Duplex or Townhome
- \$50 for Single Owner Multi-Family Building plus \$15 for every unit owned.

Checks should be made payable to "City of Waukee" and dropped off in person or mailed to: Waukee City Hall, Attn: Rental Inspections, 230 W. Hickman Road, Waukee, IA 50263.

I HEARBY STATE THAT THE INFORMATION GIVEN ABOVE IS CORRECT. I AGREE TO COMPLY WITH ALL CITY OF WAUKEE ORDINANCES AND STATE LAWS REGULATING BUILDING CODES.

Signature of owner/manager: _____ Date: _____

If you will be designating an agent for inspections, please complete the "Designated Agent Form".