

CITY OF TODD MISSION - RENTAL PROPERTY REGISTRATION FORM

Property Owner Information:

- Owner's Name: _____
- Owner's Address: _____
- City, State, Zip: _____
- Phone Number: _____
- Email Address: _____

Rental Property Information:

- Property Address: _____
- City, State, Zip: _____
- Type of Property (Single-family, Duplex, etc.): _____
- Number of Units (if applicable): _____
- Year Built: _____

License Information:

- New Application
- Renewal Application
- New Owner Application
- License Number (for renewals/new owner): _____

Property Manager (if applicable):

- Manager's Name: _____
- Manager's Address: _____
- City, State, Zip: _____
- Phone Number: _____
- Email Address: _____

Compliance Declaration:

- I declare that the property meets all zoning, health, and safety requirements as per the City of Todd Mission Code.

- I understand that the city will inspect the exterior of the dwelling upon application or renewal of the license to ensure compliance.
- I agree to provide access for interior inspections under the conditions specified in the ordinance.

Signature:

- I certify that the information provided on this form is accurate and complete to the best of my knowledge. I understand that providing false information may result in penalties as outlined in the ordinance.
- Owner/Agent Signature: _____
- Date: _____

Application Fee:

- Please include the application fee as listed in the adopted annual city fee schedule. Checks should be made payable to the City of Todd Mission.

Submit Form and Payment To: City of Todd Mission 21718 FM 1774 Todd Mission, TX, 77363