

# City of Taylorsville

Community Development Department  
2600 West Taylorsville Boulevard  
Taylorsville, Utah 84118  
Phone: (801) 963-5400 Fax: (801) 955-2015



## RESIDENTIAL RENTAL LICENSE APPLICATION

**Application For:**  New Business  Change of Ownership  Add Dwelling  Remove Dwelling  
**Rental Type:**  Apartment Complex  Multi-family Building  Duplex  Single Family Rental(s)

**Name of Applicant:** \_\_\_\_\_

**Business Name (if applicable):** \_\_\_\_\_

**Mailing Address:** \_\_\_\_\_

(Street Address - No P.O. Boxes)

(City)

(State)

(Zip)

**Business (Rental) Location:** \_\_\_\_\_

(Street Address - No P.O. Boxes)

(City)

(State)

(Zip)

**Business Phone:** \_\_\_\_\_ **Fax:** \_\_\_\_\_

**Home Phone:** \_\_\_\_\_ **Cell Phone:** \_\_\_\_\_

**Email:** \_\_\_\_\_

**Ownership Type:**  Corporation  LLC  Partnership  Sole Proprietor

**If Corporation, List Corporation Name:** \_\_\_\_\_

**Contact/Responsible Party Information:**

**Information On:**  Sole Proprietor  Partner\*  President  Property Manager

**Name:** \_\_\_\_\_ **Phone:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**Email:** \_\_\_\_\_

**Information On:**  Property Manager  Partner\*

**Name:** \_\_\_\_\_ **Phone:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**Email:** \_\_\_\_\_

\*Please note that this information is required for all partners – attach additional sheets if necessary

**I have been informed of the Good Landlord Program and  I do or  I do not wish to participate at this time.**

New Applicants of the Good Landlord Program must also submit a Good Landlord Program Application and Good Landlord Program Agreement in order to participate in the program.

**Total Number of Rental Units:** \_\_\_\_\_ **Is a Building Remodel Proposed?**  Yes  No

**No. of Employees:** \_\_\_\_\_ **Estimated Starting Date:** \_\_\_\_\_

This form is an application for a business license only. Please note that the completion of the Residential Rental Business License Application and payment of all applicable fees does not constitute approval to operate a rental dwelling. The dwelling may be rented only after all applicable approvals and a business license has been issued. Operating a business without an approved business license constitutes a Class "B" Misdemeanor.

I, \_\_\_\_\_, hereby agree to conduct said business strictly in accordance with all Taylorsville Codes governing such businesses and certify under penalty of perjury, that the information contained herein is true and correct.

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

### FOR YOUR INFORMATION...

For more information regarding the business license application process, please refer to Taylorsville information form **L-13 Rental Licensing Information** available from the Community Development Department at Taylorsville City Hall or [www.taylorsvilleut.gov](http://www.taylorsvilleut.gov).

Distribution: Office (White) Code Enforcement (Blue) Customer (Gold)

### Office Use Only

Date Received: \_\_\_\_\_

City ID #: \_\_\_\_\_

Receipt #: \_\_\_\_\_

Code #: \_\_\_\_\_

GLL Request:  Yes  No

GLL Approved:  Yes  No

No. of Units: \_\_\_\_\_ @ \_\_\_\_\_

Base Fee: \$ \_\_\_\_\_

Disproportionate Fee: \$ \_\_\_\_\_

Other \_\_\_\_\_: \$ \_\_\_\_\_

**Total:** \$ \_\_\_\_\_

Comments: \_\_\_\_\_

### Planning Department

Zoning Designation: \_\_\_\_\_

Parcel #: \_\_\_\_\_

Reviewed By: \_\_\_\_\_ Date: \_\_\_\_\_