

220 E Mountain View St. Suite A Barstow, CA 92311 Phone: 760-255-5161 Fax: 760-256-1750

| Please Check One or More: | | | | | |
|---------------------------|--|--|--|--|--|
| New Application | | | | | |
| Change of Owner | | | | | |
| Change of Tenant | | | | | |
| Annual Renewal | | | | | |

| Email: rontaline poetions@baretowea.org | | Change of Tenant | | | | |
|--|--------|---|---------------------------------|---------|----------|----|
| Email: rentalinspections@barstowca.org | | Annual Renewal | | | | |
| Residential Rental Insp | ection | Services – Registration Form | *OFFICE | USE | ONL | Υ* |
| PLEASE TYPE OR PRINT CLEARLY – <u>ALL ASTERISKED INFORMATION IS REQUIRED</u> | | Application Approved | | | | |
| RENTAL PROPERTY INFORMATION | | Application Denied | | | | |
| *Rental Property Address: | | | Inspection Complete | | | |
| Single Family ☐ | | Multi-Family ☐ | Single Family Fee \$100.00 | | .00 | |
| *Total Number of Rental Units: | | | Multi-Family Fee \$100.00 | | .00 | |
| Complex Name: | | | Fee Per Additional Unit \$10.00 | |)0 | |
| Assessor's Parcel Number: | | | Total Due: | \$ | | |
| OWNER INFORMATION | | | | | | |
| | | LC, an associated natural person must be listed in the corporation or LLC must be submitted with | | nd a co | py of th | ıe |
| *Property Owner Name: | | | | | | |
| *Mailing Address: | | | | | | |
| *City/State/Zip | | | | | | |
| *Phone #1 | | | | | | |
| Phone #2 | | | | | | |
| *Email Address | | | | | | |
| *Confirm Email Address | | | | | | |
| MANAGER / AGENT INFORMATION Local agent or manager is required if the applicant resides outside a 15 mile radius of the incorporated limits of Barstow. | | | | | | |
| Property Manager / Agent Name: | | | | | | |
| Mailing Address | | | | | | |
| Phone #1 | | | | | | |
| Phone #2 | | | | | | |
| Email Address | | | | | | |
| Confirm Email Address | | | | | | |
| TENANT INFORMATION | | | | | | |
| *Tenant Name: | | | | | | |
| *Mailing Address: | | | | | | |
| *City/State/Zip | | | | | | |
| *Phone #1 | | | | | | |
| Owner's Signature: | | | Date: | | | |
| | | | | | | |