

Cleveland's rental registry already has 59,000 of the 90,000 rental homes in Cleveland. Compliance numbers continue to grow. Integrating the lead safe standard into the rental registry will lower administrative costs of implementing the program and increase compliance. The rental registration form used by the City already captures the most data about the property. Implementing CLASH's bill would require an additional section on the rental registration form in which each unit certified under one of the 6 lead safe status options outlined in the proposed changes to Section 365.02. To illustrate this change, CLASH offers a comparison of the current rental registry application and a draft rental registry application.



Certificate of Rental Registration Application

All rental property owners/agents or person in charge of any rental property designed or intended to be used as rental dwelling units located in Cleveland, OH, whether or not such units are located within the same structure or any part thereof must register and pay rental registration fees of \$35.00 per unit and obtain a Certificate of Rental Registration issued by the Department of Building & Housing for such structures or units. No fee is required for the unit that the owner occupies. Please note this not voluntary, it is a requirement of chapter 365, 369, and 371 of the Cleveland Codified Ordinances.

Applicant/Owner Information					
Name:		Phone:			
Address:					
City:	State:	ZIP Code:			
Alternate Mailing Address:					
City:	State:	ZIP Code:			
Cell Phone:	Email:	Alternate Phone:			
Rental Property Information					
List only the address of property t	hat you are registering	below.			
Property Address:			# of Units:		
City: Cleveland	State: Ohio	Zip Code:			
Name of Tenant at property:					
Address:	Suite/Unit:				
City: Cleveland	State: Ohio	Zip Code:	Phone:		
Partnership and Corporation Inform	nation				
Business Name:					
Please list the name of each officer	President:	Vice Pres.:			
General Partner:		Other:			
Address:	City/State:	Zip Code:			
Alternate Mailing Address:	State:	Zip Code:			
Custodian/Superintendent					
Name:					
Address:	City/State: Zip:				
Phone:	Cell Phone:	Alternate Phone:			
Emergency Contacts (please list at least two)					
Name:	Address:		Phone:		
If you have questions regarding this application, please call 216-664-2827 or 216-664-2826. Also you may					
come in person to Cleveland City Hall 601 Lakeside Ave – Room 517, Cleveland, OH 44114					
Signature of applicant:			Date:		



City of Cleveland

Department of Building & Housing Certificate of Rental Registration Payment Coupon

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Applicant/Owner Information				
Name:		Phone:		
Address:				
City:	State:	Zip:		
Alternate Mailing Address:				
City:	State:	Zip:		
Cell Phone:	Email:	Alternate Phone:		
Rental Property Information				
List only the address of the property that you are registering below.				
Property Address:		# of units:		
City: Cleveland	State: Ohio	Zip Code:		
Name of Tenant at property:				
Address:	Suite/Unit:			
City: Cleveland	State: Ohio	Zip Code:		
Partnership and Corporation Inform	ation			
Business Name:				
Please list the name of each officer	President:	Vice President:		
General Partner:		Other:		
Address: City/State:		Zip Code:		
Alternate Mailing Address:	State:	Zip Code:		
Custodian/Superintendent				
Name:				
Address:	City/State:	Zip:		
Phone:	Cell Phone:	Alternate Phone:		
Certify the property's lead safe status	s (attach relevant docume	ntation):		
1) Lead safe				
2) Lead safe as part of a multi-unit building				
3) Lead free				
4) Exempt (built after 1978)				
5) Exempt (rented to the owner's immediate family member)				
6) Not lead safe				

PROPOSED



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PROPOSED