

**CITY OF HARTFORD**  
**Department of Development Services**  
**Division of Licenses & Inspections**  
**Rental Licensing Program**  
**Application for Dwelling Unit Rental License**  
**Building Containing 4 to 9 Residential Units**

Pursuant to Chapter 18, Article II, of the Municipal Code, any owner(s) of buildings containing four (4) to nine (9) dwelling units **MUST** complete and submit this application prior to July 1, but not later than October 1, 2025. An approved license is good for a period of four (4) years, unless revoked for good cause beforehand.

**NOTE:** This application shall be considered complete only if it includes all required attachments and supplemental materials. The submission of additional information or documentation may be required in order to process this application. All requested information on this form must be provided and must not contain significant or multiple inaccuracies. Prior to the issuance or renewal of a license, the building or complex **MUST** be inspected in order to ensure compliance with Chapter 18 of the Municipal Code.

**FEE:** The non-refundable fee that **MUST** be submitted with this license application is: **sixty dollars (\$60), plus fifty dollars (\$50) per dwelling unit.**

**(1) Address of Building:** \_\_\_\_\_

**# of Rooms in Building** \_\_\_\_\_ **# of Dwelling Units** \_\_\_\_\_

**# of Occupants allowed in each Rooming Unit** \_\_\_\_\_

**(2) Owner's Full Legal Name<sup>1</sup>:** \_\_\_\_\_

**Address (Full Street #. No P.O. Boxes):** \_\_\_\_\_

**Phone and Email:** \_\_\_\_\_

<sup>1</sup> If the owner or operator is a **partnership**, the name of the managing partner must be provided, but if there is no managing partner, then the names of each general partner must be provided (Attach additional sheets if necessary).

If the owner or operator is a **limited liability company**, the name of the managing member and the name of agent registered with the State must be provided.

In the case of a **corporation**, or other business entity, the name of the president, secretary, and the name of the agent registered with the State must be provided.

In the case of a **trust**, the name of at least one *trustee* must be provided.

(3) Operator / Manager's Full Legal Name: \_\_\_\_\_

Address (Full Street #. No P.O. Boxes): \_\_\_\_\_

\_\_\_\_\_  
Phone and Email: \_\_\_\_\_

(4) Registered Agent's (must be a City of Hartford resident if owner is an individual) Name:

\_\_\_\_\_  
Address (Full Street #. No P.O. Boxes): \_\_\_\_\_

Phone and Email: \_\_\_\_\_

(5) Name of person(s) responsible for emergency response related to the subject property who can reached at any time, changes of which MUST be reported to RLP within twenty (24) hours :

\_\_\_\_\_  
Address (Full Street #. No P.O. Boxes): \_\_\_\_\_

Phone and Email: \_\_\_\_\_

## **APPLICANT MUST SUBMIT THE FOLLOWING WITH THE APPLICATION:**

- I. A copy of a driver's license or comparable state-issued photo identification showing the name, photo, and address of the owner or owners required to be named in above and the address of the registered agent and operator (if any), or an affidavit with the name of the owner or owners required to be named above stating that the business address given is a bona fide business address that is a physical address and not a post office box.
- II. A lead inspection report by a certified lead inspector documenting that the housing or housing unit is lead safe for buildings constructed before 1978, if a unit is being or will be rented to an individual the age of 6 years or younger.
- III. A heating facility inspection report, dated within the twelve (12) months preceding the application submission date and indicating that the heating facility for such premises has been inspected within the last year by a person licensed to design, construct or repair a heating facility and that such heating facility meets the requirements of all applicable Codes, except that no such report shall be required for a heating facility that for all primary components is ten (10) years old or less.
- IV. If available, a copy of the latest energy efficiency audit completed for the building.
- V. At the discretion of the director of licenses and inspections, a description of rubbish disposal facilities (including recycling), extermination and pest control plans and practices, energy efficiency plans and practices, water efficiency plans and practices, snow removal plans, and, if applicable, other sustainability measures, lead paint evaluations, and landscape and weed control plans.

### **IMPORTANT:**

1. Failure to submit a complete application and failure to submit a timely license renewal application will result in an additional fee of one thousand dollars (\$1,000), in addition to other penalties, including fines of \$100 per day. Providing inaccurate information constitutes a violation subjecting the owner to fines.
2. Within thirty (30) days of a change in any of the information within this application for a rental license, such change must be submitted to the director of licenses and inspections, in the same format, with the same required documents required by section 18-24. A change in address of a registered agent shall not be accepted by the director of licenses and inspections if it purports to change the address of the registered agent to a location otherwise prohibited by this code as directed through this application. Any increase in the number of rooms in the building, the number of rooming units, or the number of persons proposed to be accommodated or allowed in each rooming unit shall not be permitted without a full and complete new application submitted to the division of licenses and inspections.

3. The issuance of a license shall not relieve the owner and operator of the responsibility to make general repairs pursuant to chapter 9 of the code, maintain fire protection equipment pursuant to chapter 13 of the code, manage solid waste pursuant to chapter 15 of the code, maintain and preserve historic housing as required by chapter 28 of the code, repair and clear of sidewalks and public ways pursuant to chapter 31 of the code, maintain landscaping (including trees and green infrastructure) pursuant to the zoning regulations and chapter 28 of code, and perform other responsibilities required by any other law, rule, or regulation.
4. A valid and unexpired license shall be deemed to be a certificate of apartment occupancy for the purposes of satisfying the requirement established in G.S. § 47a-57.
5. A revocation of a license shall result in the permanent ceasing of all licensable activities until and unless another license is obtained. In such a circumstance, the director of licenses and inspections may order occupants (if any) to vacate, and such occupants shall be relocated at the expense of the owner in accordance with state and local law.

### **Acknowledgement and Certification**

I hereby certify that the information contained within this Application is true and accurate.  
 I further acknowledge that I will be penalized for false representation in connection with information falsely presented.

\_\_\_\_\_  
 OWNER/OPERATOR SIGNATURE  
 Print:

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

\_\_\_\_\_  
 OWNER/OPERATOR SIGNATURE  
 Print:

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

\_\_\_\_\_  
 CITY RESIDENT ACTING AS REGISTERED AGENT  
 (If Different than Owner and Operator)  
 Print:

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

**ADDITIONAL SPACE (If Needed)**

**Owner's Full Legal Name:** \_\_\_\_\_

**Address (Full Street #. No P.O. Boxes):** \_\_\_\_\_

\_\_\_\_\_

**Phone and Email:** \_\_\_\_\_

**Owner's Full Legal Name:** \_\_\_\_\_

**Address (Full Street #. No P.O. Boxes):** \_\_\_\_\_

\_\_\_\_\_

**Phone and Email:** \_\_\_\_\_

**Owner's Full Legal Name:** \_\_\_\_\_

**Address (Full Street #. No P.O. Boxes):** \_\_\_\_\_

\_\_\_\_\_

**Phone and Email:** \_\_\_\_\_

**Owner's Full Legal Name:** \_\_\_\_\_

**Address (Full Street #. No P.O. Boxes):** \_\_\_\_\_

\_\_\_\_\_

**Phone and Email:** \_\_\_\_\_

**Owner's Full Legal Name:** \_\_\_\_\_

**Address (Full Street #. No P.O. Boxes):** \_\_\_\_\_

\_\_\_\_\_

**Phone and Email:** \_\_\_\_\_

**Owner's / Operator's Full Legal Name:**  
\_\_\_\_\_

**Address (Full Street #. No P.O. Boxes):** \_\_\_\_\_

\_\_\_\_\_

**Phone and Email:** \_\_\_\_\_