



South Sioux City 2022 Rental Inspection Program License Application

Inspection Services Department
1615 1st Avenue
South Sioux City, NE 68776
Phone: (402) 494-7521
Fax: (402) 494-6215
Email:
rentalinspection@southsiouxcity.org
www.southsiouxcity.org

Date: _____

Property Owner Information

Property Owner Name: _____ Business Name: _____
Address: _____ City: _____ State: _____ Zip: _____
Business Phone: _____ Cell Phone: _____ Email: _____

Property Manager/Local Agent Information

Property Manager/Local Agent Name: _____
Address: _____ City: _____ State: _____ Zip: _____
Business Phone: _____ Cell Phone: _____ Email: _____

Registered Agent (if property owner is a corporation) Information

Registered Agent Name: _____ Corporation Name: _____
Address: _____ City: _____ State: _____ Zip: _____
Business Phone: _____ Cell Phone: _____ Email: _____

The undersigned hereby applies for a rental dwelling license as required by City Code and attests that the subject premises will be operated and maintained according to the City's requirements for rental property and understands they are subject to applicable penalties if not in compliance. The applicant certifies that the following are true:

1. Property owner and property manager are aware of and agree to abide by the occupancy requirements pursuant to Section 404, Occupancy Limitations, of the IPMC and South Sioux City Municipal Code, Chapter 130, Zoning Ordinance, Article 2, Section 130.51, and the legal ramifications for knowingly violating said codes;
2. Property owner and/or property manager are aware and understand the Nebraska Uniform Residential Landlord and Tenant Act (R.S.S. 76-1401 to 76-1449) and/or the Nebraska Mobile Home Landlord and Tenant Act (R.S.S. 76-1450 to 76-14,111) and have provided a copy of the Landlord Tenant Law Act Brochure to occupants of the rental property; and
3. Property owner and/or property manager have provided with this application, the name(s) of all occupants of the rental dwelling, relationship to the renter, renter's phone number; and
4. Property owner and/or property manager attest that all structures are in compliance with Section 309 of the IPMC pertaining to insect and rodent infestation.

The applicant further certifies that all statements and facts in this application are true and authorizes the City of South Sioux City to investigate any or all statements or facts contained herein; acknowledging that misrepresentation or the omission of facts will be cause for the revocation of the rental dwelling license. I understand that repairs may require permit(s) and if so, I will obtain permits and call for inspections as required.

Failure to register rental property after the due date will result in penalties for violation of Ordinance 2015-08 and shall be deemed guilty of a misdemeanor or civil infraction as determined by the code official and cited by the South Sioux City Police Department. Each day a violation continues shall constitute a separate offense and violation subject to prosecution.

I certify and declare that I have the authority to and herein provide the information above on this application to the best of my knowledge. I understand that the issuance of this license is conditioned upon compliance at all times with all applicable ordinance, regulations and statutes of the City of South Sioux City, NE.

Signature of Owner/Property Manager

Printed Name of Owner/Property Manager

Date Signed

Please List All Rental Properties Below:

If you have more than one property, please see next page, there is a space for each property.

RENTAL PROPERTY INFORMATION – TYPE OF RENTAL:

() Single Family or Townhouse () Duplex () 3-Plex () 4-Plex () Multi-Family/Apartment () Mobile Home

Rental Property Address: _____

Total Number of Buildings: _____ Total Number of Rental Units: _____

** Please list how Duplex , 3-Plex, 4-Plex units are listed on the lines below:

(example – 303 Derby Lane, Apt. 1, 2 & 3 – 305 Derby Lane, Apt. A, B & C).

Rental License Fee

Single Family Dwelling: \$50.00 per Structure

Total Fee _____

Multi-Family Dwelling: \$50.00 per Structure = _____ PLUS \$10.00 per Additional Unit = _____ Total Fee _____

(Multi-Family Dwelling fee schedule example: 4-plex. \$50 for structure including one unit plus \$10 ea additional rental unit = \$80)

Make Check of Total Fee Payable to the City of South Sioux City, Nebraska



Property Owners Name: _____

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Rental Property Address: _____

Total Number of Buildings: _____ Total Number of Rental Units: _____

** Please list how Duplex , 3-Plex, 4-Plex units are listed on the lines below:

(example – 303 Derby Lane, Apt. 1, 2 & 3 – 305 Derby Lane, Apt. A, B & C).

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