OFFICE OF NEIGHBORHOOD SERVICES

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APPLICATION FOR CERTIFICATE OF COMPLIANCE RENTAL UNIT CONSERVATION LAW

| Ir | n accordan | ce with Sec | ction 22.1 | | nances of City on NS ON BACK | of Columbia, Missouri - | Updated 12/2014 | |
|---|--------------------|-----------------------|--------------------------|-----------------------|------------------------------|------------------------------------|----------------------|------------|
| New Application | Renev | wal | Ne | w Construction | | Transfer | | |
| | (With | Without |) | (C.O. less tha | an 6 months) | (Purchased | d within the last 15 | days) |
| Rental Property Address: | | | | | | Date: | | |
| ☐ Application for new CO | C: Applicat | ion fee for I | new appli | cations, new constru | uction or buildin | ngs renewing with inspe | | |
| Inspection Fee – new a ☐ Application fee for rener ☐ Application to Transfer | , , wals not re | quiring an i | nspection | າ ັ້, | | No. of Units: No. of Buildings: | X \$26.00 = | |
| Application to Transier | - ргорение | 3 must nav | e passeu | inspection within the | c last To month | No. of Buildings: _ | X \$10.00 = | |
| Owner: | | | | | | Daytime phone: | | |
| Address: | | Street) | | (City 0 State) | <u> </u> | | /7in Codo | ١ |
| | · | · | | (City & State) | | | (Zip Code) |) |
| Operator: | | | | | Phone N | Number: | | |
| Agent: | | | | | Phone N | Number: | | |
| Address: | | <u>(Cl. 1)</u> | | | | | | - /7: |
| Primary contact should be | with (checl | (Street) k one): □ | | | ty & State) Agent | | | (Zip code) |
| Primary Contact Email | | | | Cell | Phone | | | |
| PRESENT USE: Multi-Fa | amily | Rooming I | House | Two-Family | Single-Fa | mily Single-Fa | mily Attached | |
| Pre-manufactured housing | [] Seri | ial # | | | Park: | | Lot # | _ |
| DATE RENTAL USE ESTA | ABLISHED |): | ZONING CODE OF PROPERTY: | | | | | |
| ALL APPLICATIONS M | UST BE S | SIGNED A | ND AC | COMPANIED BY N | <u>MECHANICAI</u> | L CERTFICATE AN | D CORRECT FEE | <u>=S</u> |
| The undersigned hereby ce undersigned is either the over | | | | | | | | |
| | | | | _ If Corpora | tion: | | | |
| Owner | | | | • | Presiden | t | | |
| | | | | | Secretar | у | | |
| The owner/operator/agent r | nay sign th | e following | consent f | orm to allow the city | inspector to hav | ve access to the premis | es in the absence o | f the |

owner/operator/agent:

CONSENT TO INSPECTION

I hereby consent and authorize the Director of Community Development, or designee, to enter upon and inspect the premises for which application is being made for the purpose of inspecting said premises to determine whether or not such premises is in compliance with Chapters 6, 9 (article II), 20, 23, 24, 25 and 29 of the City Code of the City of Columbia, Missouri for issuance of a certificate of compliance the Rental Unit Conservation Law.

| Owner/O | perator/Agen | t |
|---------|--------------|---|

Fees:

- NEW APPLICATION or RENEWAL WITH INSPECTION Property entering the rental program for the first time or
 property with certificate due to expire (\$60.00 application fee per building PLUS \$26.00 inspection fee per dwelling
 unit or rooming unit.)
- RENEWAL WITHOUT INSPECTION (\$43.00 application fee per building) Property which was inspected at last renewal date and found to have no complaints since last renewal AND for which a current certificate exists.
- NEW CONSTRUCTION with CERTIFICATE OF OCCUPANCY LESS THAN 6 MONTHS (\$60.00 application fee per building)
- TRANSFER Property purchased <u>within the last fifteen (15) days (Sec. 22-192)</u> for which certificate of compliance is current. To qualify for a transfer, the property must have passed a city rental inspection within the last 18 months. The Certificate cannot be renewed without inspection upon expiration. (\$10.00 per building application fee)

POSSIBLE ADDITIONAL FEES:

- **REINSPECTION FEE** \$43.00 re-inspection fee per unit or rooming unit must be paid if violations are noted as a result of the inspection required by this application.
- A \$34.00 fee will be assessed when owner or owner's representative **fails to meet** with inspector at scheduled appointment time.

INSTRUCTIONS:

- ⇒ PLEASE PRINT OR TYPE
- ⇒ SUPPLY ALL INFORMATION REQUESTED ON FRONT OF APPLICATION.
- ⇒ (Forms not properly completed will be returned.)
- ⇒ PLEASE READ THE CONSENT TO INSPECTION PARAGRAPH
- ⇒ ZONING DESIGNATION MUST BE COMPLETED BY THE PROPERTY OWNER PRIOR TO SIGNING.

Note on zoning compliance: Chapter 29 of City Ordinance defines a family as well as the number of unrelated people allowed to live together in one unit. No more than four unrelated people are allowed to live together in any part of Columbia; other zoning districts are restricted to three unrelated people. By applying for a Certificate of Compliance you are agreeing to comply with this ordinance. Failure to comply may result in prosecution.

Checks Payable to: CITY OF COLUMBIA

Mail application to: DEPARTMENT OF COMMUNITY DEVELOPMENT

OFFICE OF NEIGHBORHOOD SERVICES

P O BOX 6015

COLUMBIA, MO 65205

Or bring to the Service Center, 701 E. Broadway, 3rd floor.

HAVE YOU: [1] COMPLETED YOUR APPLICATION?

[2] ENCLOSED YOUR MECHANICAL CERTIFICATE?

[3] ENCLOSED THE CORRECT FEE?

[4] VERIFIED THE ZONING FOR EACH PROPERTY LISTED ON APPLICATION?

IF YOU HAVE ANY QUESTIONS CONCERNING THIS APPLICATION,
PLEASE FEEL FREE TO CALL OUR OFFICE AT 817-5050, neighborhood@GoColumbiaMo.com OR ONLINE AT
www.GoColumbiaMo.com/Neighborhoods.



Heating and ventilation systems certificate of inspection and approval

Per City Ordinance 22-186 (E)

CITY OF COLUMBIA, MISSOURI Office of Neighborhood Services

This is the water heating, space heating, furnace, fireplace and ventilation system inspection certificate for rental property. Complete the top portion, and either the gas or electric section below. The water heating, space heating and ventilation system section (center section) must be signed by a licensed journeyman or master mechanic. The ORIGINAL SIGNED form must be returned with application, NO FAXED OR COPIED CERTIFICATES WILL BE ACCEPTED.

| Rental Property Address: | | | | |
|---|--------------------------------|--|--|--|
| Unit numbers, Apt, or Rm: | | | | |
| Owner's Name: | | | | |
| Owner's Address: | | | | |
| HEATING AND VENTILATION SYSTEMS CERTIFICATION This is to certify that I, or a qualified representative of the co heating, space heating and ventilation systems in the abov functioning properly and safely. This certificate is issued certificate of compliance. | e premises and the systems are | | | |
| · | | | | |
| Mechanical Contractor Name | _Inspection Date | | | |
| Contractor Address | _Phone # | | | |
| Mechanic Name (printed) | | | | |
| Mechanics Signature | | | | |
| ELECTRIC HEATING AND VENTILATION SYSTEM CERTIF | ICATION | | | |
| Heating systems which do not use gas for heating water or living areas do not require an inspection by a mechanic. The owner or agent for the rental property may complete and sign the spaces below for electric heating systems. | | | | |
| This is to certify that the water heating, space heating and ventilation systems at the above address are all electric. | | | | |
| Rental Property Owner/Agent (Printed name) Date | | | | |
| Rental Property Owner/ Agent (Signature) | | | | |