



**LANDLORD RENTAL AND PROPERTY OWNER
REGISTRATION
P.O. BOX 69
NIAGARA FALLS, NY 14302
TELEPHONE: (716) 286-4464**

Dear Non-Owner Occupied or Rental Property Owner:

Please be advised your rental renewal is now due. You have 30 days to complete the renewal process without penalty. This renewal will be for a two year period.

IF THERE ARE NO CHANGES ON THIS PROPERTY, PLEASE INITIAL THIS LETTER AND RETURN IT WITH YOUR CHECK.

All non-owner occupied or rental property owners within the City of Niagara Falls are required to register their properties whether the building is occupied or vacant. A registration form must be completed for each parcel owned. The fees are as follows:

Buildings and unoccupied property containing one or two rental units	\$25.00
Buildings and unoccupied property containing three or more rental units	\$40.00

To complete the process, please complete the enclosed application and make your checks or money orders payable to the **City Controller** and mail the completed form together with the check to:
City of Niagara Falls
Landlord Rental Registration
P.O. Box 69, Room 35
Niagara Falls, NY 14302

Failure to register any rental property or non-owner occupied property required to be registered under this chapter shall be in violation and a late fee will be assessed as follows:

\$50 after due date
\$200 after 60 days to 120 days
\$500 after 121 days to 150 days
\$750 after 151 days to 200 days
\$1,200 after 201 days

Be further advised that unpaid registration fees and late fees shall be a lien on the rental property or unoccupied property subject to this chapter.

Any concerns concerning this application may be directed to the Landlord and Property Clerk at 716-286-4464. Additional applications can be obtained online at www.niagarafallsusa.org under **NEWS AND ANNOUNCEMENTS**.



LANDLORD RENTAL AND PROPERTY OWNER RENEWAL APPLICATION

745 Main St • Room 35 • P.O Box 69 • Niagara Falls, NY 14302
Phone: 716-286-4464 Fax: 716-286-4454

Property Address: _____

Number of Buildings located on parcel: _____

Type Rental Unit: ☐ Single Family Dwelling ☐ Two Family ☐ Three Family
☐ Four or More Family ☐ Rental Condo
☐ Vacant Building ☐ Mix Use (Commercial/Residential)

Owner Information: (please print) Individual(s) _____ Corporation _____

Name: _____ Date of Birth: _____
(required)

Phone Number: _____ Fax Number: _____

Cell Phone: _____ E-Mail Address: _____

Home Address: _____

City: _____ State: _____ Zip: _____

Insurance Company / Agent Information: _____

Insurance Company / Agent Information Phone Number: _____

Corporation Officer/Co-Owner Information (If Applicable, if more room is needed please attach another sheet)
DO NOT USE A POST OFFICE BOX AS A MAILING ADDRESS.

Name: _____ Date of Birth: _____
(required)

Phone Number: _____ Fax Number: _____

Cell Phone: _____ E-Mail Address: _____

Home Address: _____
(No P.O. Boxes, please)

City: _____ State: _____ Zip: _____

Property Manager / Agent Information (Applicable ONLY IF owner resides outside of Erie or Niagara County)

Name: _____ Date of Birth: _____

Phone Number: _____ Fax Number: _____

Cell Phone: _____ E-Mail Address: _____

Home Address: _____

City: _____ State: _____ Zip: _____

Owner

Property Manager/Agent

Sign: _____
(Signature Required)

Sign: _____

Print: _____

Print: _____

Date: _____

Date: _____

Owners with more than one residential rental properties in the City of Niagara Falls should copy this page and the registration form to list additional properties. Additional applications can be obtained online at www.niagarafallsusa.org under **NEWS & ANNOUNCEMENTS.**

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