RESIDENTIAL RENTAL EXCEPTION FORM

Name of owner of rental property: ________________________________________________________

Owner's mailing address: __________________________________________________________________

City, State, Zip Code: ____________________________________________________________________

Telephone number of contact person: ______________________________________________________

Street address of rental property(s): __________________________________________________________________

Please check the box that explains why the property is not a rental:

☐ Property was sold
☐ Owner is deceased or has long term illness and property has been vacant more than 2 years
☐ Property has been damaged or destroyed
☐ Relatives live on property and no rent is being charged
☐ Owner-occupied

List other reason that the property is not a rental: __________________________________________

I declare under penalties of perjury that this statement is true, correct and complete.

Signature: ____________________________________________________________________________ Date: __________________

Owner's Phone Number: __________________________________________________________________

Send completed forms to: Karl L. Keith
ATTN: Rental Registration
451 West Third Street
First Floor
Dayton, OH 45422

Phone: (937) 225-4314
Fax: (937) 225-5036
Email: auditor@mcohio.org