

# APPLICATION FOR LETTER OF COMPLIANCE & TOWN OF STAR CITY RENTAL UNIT REGISTRATION FORM

**PLEASE USE SEPARATE FORM FOR EACH STRUCTURE REGISTERED**

DATE: \_\_\_\_\_

THIS IS AN INITIAL APPLICATION ( )

MAP \_\_\_\_\_

THIS IS A RENEWAL APPLICATION ( )

PARCEL \_\_\_\_\_

DWELLING LOCATION: \_\_\_\_\_

OWNERS NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY-STATE-ZIP: \_\_\_\_\_

AREA CODE/PHONE HOME: \_\_\_\_\_

AREA CODE/PHONE WORK: \_\_\_\_\_

NOTIFY IN CASE OF EMERGENCY or NON-CONFORMANCE:

OWNER: \_\_\_\_\_ **OR:**

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY-STATE-ZIP: \_\_\_\_\_

AREA CODE/PHONE HOME: \_\_\_\_\_

AREA CODE/PHONE WORK: \_\_\_\_\_

NUMBER AND TYPE OF OCCUPANCY WITH APPLICATION FEES (for each separate structure):

- \_\_\_\_\_ APARTMENTS (per structure) X \$25.00 Per Apartment UP TO 5 UNITS
- \_\_\_\_\_ APARTMENTS (per structure) X \$15.00 Per Apartment FOR 6 OR MORE/STRUCTURE
- \_\_\_\_\_ ROOMERS X \$15.00 PER SLEEPING ROOM (Owner occupied w/more than 1 roomer-per dwelling unit)
- \_\_\_\_\_ BOARDING/LODGING ROOMS X \$15.00 PER SLEEPING ROOM (per structure)
- \_\_\_\_\_ HOUSE (or single-family dwelling unit) \$25.00

\_\_\_\_\_ NUMBER OF OFF-STREET PARKING SPACES (for structure listed above)

CONSENT TO INSPECT GIVEN: \_\_\_\_\_

Signature of Owner or Applicant

CONSENT TO INSPECT NOT GIVEN: \_\_\_\_\_

Signature of Owner or Applicant

PAYABLE TO: TOWN OF STAR CITY

RETURN TO: 370 Broadway Ave

Star City, WV 26505

EMAIL: [buildinginsp@starcitywv.com](mailto:buildinginsp@starcitywv.com)

OFF: 599-3550

FAX: 599-1130

-----OFFICE USE ONLY-----

FEE SUBMITTED: \$ \_\_\_\_\_

Received by: \_\_\_\_\_

RECEIPT NUMBER: \_\_\_\_\_

DATE: \_\_\_\_\_