Village of Island Lake

Department of Building • Zoning • Code Enforcement 3720 Greenleaf Avenue Island Lake Illinois 60042 Phone: 847-416-7861 Fax: 847-526-1534



Rental Unit Registration Application

PROPERTY OWNER INFORMATION			
Type of Ownership: Individual Partnership Corporation Other	her:		
Owner/Taxpayer Name	Phone	Email	
Owner Address	City	State	Zip
PROPERTY INFORMATION			
Rental Property Address		Unit#	Island Lake,
Number of dwellings Living Area square footage	# of bedrooms	_	
of bathrooms Attached garage (yes/no) # of bedrooms	oms and/or bathrooms in th	ne basement or attic	_
Fenant Name	Tenant move i	n date	20
PROPERTY MANAGEMENT INFORMATION			
Name			
Address City		State Zip	
PERSON/PERSONS TO RECEIVE NOTICES Owner Manage	ment		
ADDITIONAL RENTAL UNITS How many additional units do you own in the Village Island Lake?	List additional addr	esses below.	
Use the back of this application and/or attach an additional page if i	necessary		
, the undersigned, declare that the statements made on applicatio containing false information will not be approved. I have also read a Code (https://villageofisdlandlake.com/ordinances/) and I agree to a	nd understand the requirer	ments set forth in Title 8, Cl	
Property Owner print nameSi	gnature	Date	
Rental registration is valid for two years as described in the Village of Registration and Inspection. An inspection is required before new to	enant occupancy.	tion and fee for each renta	
Detached rental units (houses, townhomes and condominiums) will		e for each rental anit.	
Detached rental units (houses, townhomes and condominiums) will Attached rental units (apartment complexes) may submit one applic			
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