

MuniServices Reference Number: LAN

Rental Housing License Account Number: _____



Finance Department
44933 N. Fern Ave.
Lancaster, CA 93534
(661) 723-6237

RENTAL HOUSING EXEMPTION APPLICATION

This application is used to request a Rental Housing exemption in the City of Lancaster. Please complete this application and submit it to the Finance Department along with a copy of your current electric or gas bill for the property you are requesting an exemption for. The bill must be in the name of the property owner or the family member that resides at the property.

Note: This application will not be processed without a current electric or gas bill attached. Documents submitted will not be returned. Normal photocopy fees will apply if applicable.

Please list all residential properties that are located within the City of Lancaster but not currently licensed on your Rental Housing Business License account that you are requesting an exemption for.

- Property Owner Name _____
Property Address _____
Occupant Name _____
Occupants Relationship to Property Owner _____
- Property Owner Name _____
Property Address _____
Occupant Name _____
Occupants Relationship to Property Owner _____

By signing below, I understand that any incompleteness or falsification of any fact may result in denial of this application or revocation of any license issued. If an exemption is granted and it is later determined that a property was indeed a residential rental unit, I understand that all rental housing license fees will be due for the entire period in which the exemption was granted plus penalties and the current license fees. The property owner must notify the City in writing within 30 calendar days of renting a property that was previously exempted. All provisions of the Lancaster Municipal Code, County codes, and applicable Federal and State laws must be complied with before business can be lawfully conducted. I declare under penalty of perjury that I have answered these questions completely and truthfully.

SIGNATURE _____ TITLE _____ DATE _____

PRINTED NAME _____ PHONE # (____) ____ - _____

DO NOT WRITE BELOW THIS LINE

Department Approvals _____ Date _____ By _____
FINANCE

CODE ENFORCEMENT