



# CITY OF HOUSTON

Department of Public Works and Engineering

Sylvester Turner

Mayor

Carol Haddock, P.E.  
Director  
P.O. Box 1562  
Houston, Texas 77251-1562

832-395-2500  
www.houstontx.gov

## Multi-Family Rental Property Registration

	YES	NO
Are you the owner or appointed agent/manager of the property you are registering?	<input type="checkbox"/>	<input type="checkbox"/>
Does the apartment community have 3 or more living units?	<input type="checkbox"/>	<input type="checkbox"/>
Is the complex within the Houston city limits?	<input type="checkbox"/>	<input type="checkbox"/>
I understand that this application is an official government record. I understand that knowingly making a false entry or omitting required information in one or more of the above fields could result in criminal charges and the denial/revocation of my registration.	<input type="checkbox"/>	<input type="checkbox"/>

### Current Contact Information

- Please print your name and exact property address where you can be contacted.

First Name:  Last Name:

Email:  Contact Phone:

Mailing Address:

### Physical Property Location \*Address where the apartment complex is located

Street No:  \* Street Name:  \*

(Please include Direction and Type)

State of \_\_\_\_\_

County of \_\_\_\_\_

BEFORE ME, the undersigned authority on this day personally appeared \_\_\_\_\_, who being by me duly sworn, on oath stated the above and the following.

Signed under oath on this \_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

\_\_\_\_\_  
Property Owner (signature)

SUBSCRIBED AND SWORN to before me this \_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

\_\_\_\_\_  
Notary Public, State of \_\_\_\_\_

**or Officer Authorized to Administer Oaths**

1. Property

Primary Business Mailing Information

**Property Name:**  **Business Phone:**

**Business Email:**  **Business Fax:**

**Address:**  **City:**  **State:**  **Zip:**

**Registration Type:**  \*

(\*L.L.C., L.L.P., L.P., Non-Profit, R.E.I.T., T.I.C., Other)

**Roof Type:**  \*

(\*Flat, Pitched, Both)

**Property Kind:**  \*

(\*Asstd. Living, HATCH Property, HUD Sec. 8 Dwelling, Individual Rental Units, Senior Housing, Single Residency (SRO))

Number of Unit/Types

**1 Bedroom:**  **2 Bedroom:**  **3 Bedroom:**

**4 Bedroom:**  **5 Bedroom:**  **6 Bedroom:**

**Total Units:**

**# of Addresses:**  **Occupancy (%):**  **Date Opened:**

**# of Pools:**  **# of Hydrants:**  **# of Pay Phones:**

2. Management

Property Management Entity

- A company, appointed to be responsible for the daily operations, to manage the services that are provided and to carry out maintenance required.

**Is this property managed by a management company?** **YES**  **NO**

If yes, complete the following – if no, move to the next step:

**Company Name:**  **Company Phone:**

**Contact Name:**  **Company Fax:**

Address:  City:  State:  Zip:   
 Company Email:

### 3. Office

#### Property Onsite Office

- An office that is set-up/located on the property premise to handle the operations during the business hours.

Does this property have an 'on-site' office? YES NO

If yes, complete the following – if no, move to the next step:

Manager Name:  Office Phone:

Address:  City:  State:  Zip:

Office Email:  Office Fax:

#### Multi-Family Rental Property Registration Online Service

### 4. Manager

#### Property Manager

- A person appointed or hired by the owner to be responsible for the daily operations of the apartment community, etc. If the property is managed by the owner, answer 'no' to the question below and proceed to the next step.

Does this property have a 'manager'? YES NO

If yes, complete the following – if no, move to the next step:

Manager Name:  Office Phone:

Address:  City:  State:  Zip:

Email:  Manager Fax:

## Owner

## Property Owner

- A person(s), who holds the title to an apartment complex and has legal ownership of that particular property.
- If additional space is needed, please use back of form.

Owner Name:  Owner Phone:

Title Interest %:  Owner Fax:

Address:  City:  State:  Zip:

Owner Email:

Owner Name:  Owner Phone:

Title Interest %:  Owner Fax:

Address:  City:  State:  Zip:

Owner Email:

Owner Name:  Owner Phone:

Title Interest %:  Owner Fax:

Address:  City:  State:  Zip:

Owner Email:

Owner Name:  Owner Phone:

Title Interest %:  Owner Fax:

Address:  City:  State:  Zip:

Owner Email:

Owner Name:  Owner Phone:

Title Interest %:  Owner Fax:

Address:  City:  State:  Zip:

Owner Email:

5. Registered Agent

Property Registered Agent

- The person identified by the owner of an apartment community in the registration filed pursuant to this article to receive a notice required or provided for in this article on behalf of the owner.
- Note: Property must have a registered agent as required under the Texas State Law.

Agent Name:  Agent Phone:

Address:  City:  State:  Zip:

Agent Email:

6. Multiple Addresses

Property Address Information

- The street address and/or the complete postal address that describes the physical (geographic) location of the front door or main entrance of the subject property.
- Note: Add all addresses that pertain to the subject property.
- If additional space is needed, please use back of form.

Street No:   
Street Name:   
Street Type:   
City:   
State:   
Zip:

Street No:   
Street Name:   
Street Type:   
City:   
State:   
Zip:

Street No:   
Street Name:   
Street Type:   
City:   
State:   
Zip:

Street No:   
Street Name:   
Street Type:   
City:   
State:   
Zip:

Street No:   
Street Name:   
Street Type:   
City:   
State:   
Zip:

Street No:   
Street Name:   
Street Type:   
City:   
State:   
Zip:

7. Habitability

All apartment communities of three or more units (Sec 10-151) also are required to complete Habitability registration with the Department of Public Works and Engineering.

Building information for the tract

- Tract means the parcel or parcels of real property on which a multi-family rental building(s) is located. For the purposes of the Inspection Program all buildings on the same tract must be registered whether or not they are used for residential purposes.

Enter the account number(s) assigned to this tract by the appraisal (tax) district. Enter the number of buildings (occupied or not) located on each tract:

Tax Number	Buildings	Tax Number	Buildings
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Enter the year that this property was built:

Enter the Project Number appearing on the face of Certificate of Occupancy/Life Safety Compliance Certificate issued by the City of Houston for each building. Select the primary intended use for this building (Example: Residential, Garage, Pool Equipment/Chemical Storage, Office, Boiler Room, Etc.) Use Back if needed.

CO	Intended Use	CO	Intended Use
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Please make a copy and mail *all six original pages* to the following address:

**City of Houston**  
**Houston Permitting Center**  
**Attention: Habitability Inspection Section**  
**PO Box 2688**  
**Houston, TX 77252-2688**