## Application Form CONDO



**Inspections Services Regulatory Services** 

505 4<sup>th</sup> Avenue South, Room 510A Minneapolis, MN 55415 Office 612-673-3000 or 311 TTY 612-673-2157

www.minneapolismn.gov/condo-registration

Office Use Only
LIC #
Amount \$
Flag(s)
CSR Initials Date

CONDOMINIUM REGISTRATION APPLICATION						
New Application □ Update to Existing Application □						
SITE INFORMATION						
MAIN SITE ADDRESS (where range addresses and/or townhomes exist, list the first address alphanumerically as the main site)						
PROPERTY NAME (if applicable)				TOTAL NUMBER OF UNITS		
ASSOCIATION INFORMATION						
ASSOCIATION PRIMARY CONTACT (a natural person must be listed in this section)				DATE OF BIRTH		
MAILING ADDRESS (cannot be PO box or commercial mailing service)		CITY		STATE	ZIP	
PHONE	EMAIL					
ASSOCIATION ALTERNATE CONTACT				DATE OF BIRTH		
MAILING ADDRESS		CITY		STATE	ZIP	
PHONE	EMAIL				·	
MANAGING AGENT/CONTACT (if different from association primary contact)  a managing agent or contact must live no further than 60 miles driving distance from the property and/or inside the counties of Anoka, Carver, Chisago, Dakota, Goodhue, Hennepin, Isanti, Lesueur, Mcleod, Ramsey, Rice, Scott, Sherburne, Sibley, Washington, or Wright  NAME OF MANAGEMENT COMPANY						
NAME OF AGENT/CONTACT (a natural person must be listed in this section)				DATE OF BIRTH		
MAILING ADDRESS (cannot be PO Box or commercial mailing service)			CITY	STATE	ZIP	
PHONE	EMAIL			1	1	

## condominium complex as a separate line. This information can be submitted as a separate document if it doesn't fit in the table below. **Structure Address Unit Type** # of Units **Unit Scheme** (Example #1) 123 Main St NE Condominiums 101-108, 201-208, 301-308, 401-408, 501-508 **Structure Address Unit Type** # of Units **Unit Scheme** (Example #2) 4020 Alpha Street S 4020A, 4020B, 4020C, 4020D Townhomes Structure Address Unit Type # of Units Unit Scheme FIRE PROTECTION STANDARDS If the building has fire suppression or fire alarm systems, they must be inspected annually for compliance with National Fire Protection Association standards. FIRE SUPRRESSION SYSTEM **FIRE ALARM SYSTEM** Yes 🗆 No ☐ Not Present ☐ Yes 🗆 No □ Not Present **Condominium Registration Information** Registration of this condominium is required and must be renewed annually by filling out the required renewal form provided by the Department of Regulatory Services. The Condominium Registration Certificate must be posted conspicuously in a public corridor, hallway, or lobby of the condominium complex. If a public corridor, hallway, or lobby does not exist, the association shall provide dwelling unit owners with a copy of the registration certificate. Any changes to the names, addresses, and other information concerning the persons on this application must be provided in writing to the Department of Regulatory Services within fourteen (14) days. All residential units within the condominium that are not occupied by the owner are to be considered rental property and must be licensed by the individual property owner(s) through the Department of Regulatory Services. All residential units within the condominium that are used as short-term rentals (e.g. AirBnb, VRBO, etc.) must be registered by the individual property owner(s) through the Department of Regulatory Services. Condominium complexes and their grounds are subject to periodic inspections by the Department of Regulatory Services. Upon request you are responsible for providing all known rental units in your building. If applicable, documentation of annual fire alarm/suppression system inspections must be maintained and available to the Department of Regulatory Services upon request. The contact listed on this application must be available by phone 24 hours a day at the phone number provided. **Submitting This Application** In Person Applications may be submitted in person at the City of Minneapolis Service Center (located at the address at the front of this form) during the following hours: Monday to Thursday, 8:00 a.m. - 4:00 p.m. or Friday 9:00 a.m. - 4:00 p.m. City staff is available to answer questions if needed. By Mail You may also mail in the application. Make sure to include both sides of the application. I certify that the information provided on this Condominium Registration Application is true and correct. I understand that I am required to notify the Department of Regulatory Services of any changes and submit those changes in writing. I affirm by my signature below that I comply with all condominium registration standards outlined in Minneapolis Code of Ordinances, Title 12, Chapter 244. I acknowledge that the Department of Regulatory Services will hold me responsible for the maintenance, management, and any legal actions that may ensue for the above listed condominium property as controlled by the condominium association. I agree that all correspondence sent from the Department of Regulatory Services will be mailed to me as the appointed agent/contact person as listed on this application. SIGNATURE DATE ASSOCIATION CONTACT $\square$ MANAGEMENT COMPANY CONTACT □ PRINT NAME

**BUILDING SCHEME AND UNIT DETAIL INFORMATION (REQUIRED)**Enter each unique structure address, as applicable, with its corresponding unit scheme. Identify any commercial type units within the