

Rental Property Management Plan

RENTAL PROPERTY ADDRESS (INCLUDE ADDRESS #, STREET NAME, & DIRECTIONAL), Apt/Unit#							
OWNER INFORMATION							
OWNER OR SHAREHOLDER NATURAL NAME							
				DATE OF BIRTH			
CORPORATION, LLC, OR ORGANIZATION (if applicable)			DATE OF BIRTH				
ADDRESS (cannot be PO Box or commercial mailing service)		CITY		STATE	ZIP		
COUNTY	MOBILE PHONE	EMAIL					
	PROPERTY MA	ANAGER INFORMATION	N				
		different from owner					
NAME/COMPANY							
-							
ADDRESS		CITY		STATE	ZIP		
FRANI				DUONE			
EMAIL			PHONE				
QUESTION 1							
What practices do you have in place to comply with the renter protection ordinances regarding screening criteria?							
QUESTION 2							
What's your communication plan with renters?							

QUESTION 3					
What's your approach to dealing with conduct issues on a property, e.g. trash in yard, noise complaints, parking issues, etc?					
QUESTION 4					
What's your maintenance schedule and plan for the following—					
what s you maintenance schedule and plan for the following					
Interior (floors, walls, ceilings, heating, mechanical, etc)					
Exterior (roof, siding, paint, etc)					
Exterior (1001, sturing, paint, etc)					
 Nuisance abatement/landscaping (if the renters are responsible for yard maintenance and/or snow removal, detail equipment) 					
, and the same of					
QUESTION 5					
What's your procedure for renter repair issues and needs, and what's your timeframe for resolving them?					
QUESTION 6					
Outline what your plan would be if a major utility (i.e. heat, water) went offline, including a timeline.					
Outline what your plan would be it a major utility (i.e. neat, water) went offline, including a timeline.					
QUESTION 7					
Are you familiar with and have you reviewed Department of Housing and Urban Development (HUD) guidelines?					
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HUD requirement for Lead Abatement Disclosure ☐ Yes ☐ No Federal Fair Housing standards ☐ Yes ☐ No					

	QUESTION 8					
How can City staff contact you 24 hours a day, sev	en days a week? How can your r	enters contact you 24 hours a day, seven days a week?				
	QUESTION 9					
Please list other properties you own in the city of Minneapolis. (attach separately if necessary)						
	OUESTION 10					
If you have a property manager, what training did	QUESTION 10					
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 I, (print name), an authorized property manager or owner, hereby acknowledge and agree to the following: The attached management plan addresses all items listed above, includes complete documentation, and is a true and correct reflection of the undersigned's intentions; Any material change in the business plan must be submitted to the Department of Regulatory Services; Violation of this management plan may result in enforcement actions, including adverse actions against the rental license, administrative citations, and other fines; All written and electronic records necessary to document the attached management plan's provisions will be maintained within twenty (20) days of the acceptance of the plan; The undersigned will respond to an electronic request to confirm the implementation of the management plan within thirty (30) days. 						
SIGNATURE	TITLE	DATE				

- Rental License Inspection Checklist
- Chapter 244 link
- 311 poster and RLIC certificate posting
- Renter protections webpage
- Rental licensing webpage
- Rental property owners workshops

For reasonable accommodations or alternative formats please contact 311 at 612-673-3000. People who are deaf or hard of hearing can use a relay service to call 311 at 612-673-3000. TTY users call 612-263-6850. Para asistencia, llame al 311. Rau kev pab 311. Hadii aad Caawimaad u baahantahay 311.