



CITY OF CLARKSBURG

222 WEST MAIN STREET • CLARKSBURG, WV 26301 • PH. (304) 624-1633 • FAX (304) 624-6135

OFFICE OF
CODE ENFORCEMENT

**Rental Property Registration Form
Pursuant To Article 1767
(City of Clarksburg Codified Ordinance)
Form must be completely filled out and signed.**

Owner of Record: _____

Owner Address: _____

Owner phone #: _____ City Business License #: _____

Property Manager: _____ Manager phone #: _____

Property Manager Address: _____ City Business License #: _____

List all rental properties below:

1. Property Address: _____ Currently Occupied Yes ☐ No ☐

Type Building: Single Family ☐ Multi family ☐ Commercial ☐ Mixed ☐ Total number of units _____

Zone District: _____ Map/ Parcel _____ / _____ Date of last certificate of occupancy: _____

2. Property Address: _____ Currently Occupied Yes ☐ No ☐

Type Building: Single Family ☐ Multi family ☐ Commercial ☐ Mixed ☐ Total number of units _____

Zone District: _____ Map/ Parcel _____ / _____ Date of last certificate of occupancy: _____

3. Property Address: _____ Currently Occupied Yes ☐ No ☐

Type Building: Single Family ☐ Multi family ☐ Commercial ☐ Mixed ☐ Total number of units _____

Zone District: _____ Map/ Parcel _____ / _____ Date of last certificate of occupancy: _____

Signature: _____ Date: _____

Attach additional sheets if needed.

Additional Properties

Property Address: _____ Currently Occupied Yes ☐ No ☐

Type Building: Single Family ☐ Multi family ☐ Commercial ☐ Mixed ☐ Total number of units: _____

Zone District: _____ Map/ Parcel _____ / _____ Date of last certificate of occupancy: _____

Property Address: _____ Currently Occupied Yes ☐ No ☐

Type Building: Single Family ☐ Multi family ☐ Commercial ☐ Mixed ☐ Total number of units: _____

Zone District: _____ Map/ Parcel _____ / _____ Date of last certificate of occupancy: _____

Property Address: _____ Currently Occupied Yes ☐ No ☐

Type Building: Single Family ☐ Multi family ☐ Commercial ☐ Mixed ☐ Total number of units: _____

Zone District: _____ Map/ Parcel _____ / _____ Date of last certificate of occupancy: _____

Property Address: _____ Currently Occupied Yes ☐ No ☐

Type Building: Single Family ☐ Multi family ☐ Commercial ☐ Mixed ☐ Total number of units: _____

Zone District: _____ Map/ Parcel _____ / _____ Date of last certificate of occupancy: _____

Property Address: _____ Currently Occupied Yes ☐ No ☐

Type Building: Single Family ☐ Multi family ☐ Commercial ☐ Mixed ☐ Total number of units: _____

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Property Address: _____ Currently Occupied Yes ☐ No ☐

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