

**CITY OF MANKATO, CITY CLERKS OFFICE, 10 CIVIC CENTER PLAZA,  
P.O. BOX 3368, MANKATO, MN 56002-3368**

**NEW APPLICATION FOR RENTAL LICENSE  
LICENSE WILL NOT BE PROCESSED UNLESS APPLICATION IS FILLED OUT IN FULL  
AND RETURNED WITH PAYMENT (\$33 per unit)**

(Please Type or Print Clearly)

ADDRESS OF RENTAL UNIT: \_\_\_\_\_

THE PROPERTY IS CURRENTLY VACANT (with the exception of the owner)? \_\_\_\_ YES \_\_\_\_ NO

NAME OF OWNER: \_\_\_\_\_ PHONE # \_\_\_\_\_  
(first) (middle) (last)

ADDRESS: \_\_\_\_\_ DATE OF BIRTH: \_\_\_\_\_  
(street address) (city) (state) (zip)

(Please include previous addresses for three years prior to date of application)

PREVIOUS ADDRESS: \_\_\_\_\_ DATES: \_\_\_\_\_ to \_\_\_\_\_  
(street address) (city) (state) (zip)

EMAIL: \_\_\_\_\_

HAVE YOU EVER BEEN CONVICTED OF A CRIMINAL OFFENSE? \_\_\_\_ YES \_\_\_\_ NO

MANKATO CITY CODE requires a local agent if owner does not live within a 30-mile radius of the City as measured from the Veterans Memorial Bridge. License holders or agents residing in the 30-mile limitation who are not served by the local dialing service, shall provide toll-free telephone access to all tenants and City staff.

NAME OF AGENT (if any): \_\_\_\_\_ PHONE # \_\_\_\_\_  
(first) (middle) (last)

ADDRESS: \_\_\_\_\_ DATE OF BIRTH: \_\_\_\_\_  
(street address) (city) (state) (zip)

**\*\*Note if owner or agent is a business, include the above information for the principals\*\***

REFUSE HAULER: \_\_\_\_\_ RECYCLING HAULER: \_\_\_\_\_  
(Required in Triplexes and larger)

**READ THE FOLLOWING CAREFULLY BEFORE CHECKING WHICH TYPE OF RENTAL UNIT APPLIES  
CHECK ONE ONLY AND COMPLETE QUESTIONS FOR THAT SECTION**

\_\_\_\_\_ SINGLE OR TWO FAMILY DWELLING \_\_\_\_\_ Single-family \_\_\_\_\_ Two-family  
Number of bedrooms in unit #1 \_\_\_\_\_ Number of bedrooms in unit #2 \_\_\_\_\_  
Size of bedrooms (sq. feet) in unit #1: room 1 \_\_\_\_\_ room 2 \_\_\_\_\_ room 3 \_\_\_\_\_ room 4 \_\_\_\_\_ room 5 \_\_\_\_\_  
Size of bedrooms (sq. feet) in unit #2: room 1 \_\_\_\_\_ room 2 \_\_\_\_\_ room 3 \_\_\_\_\_ room 4 \_\_\_\_\_ room 5 \_\_\_\_\_

R-1 & R-2 Zoning Districts. Two off-street parking stalls are required for each dwelling unit.

Other Residential Districts. Bedroom sizes in each unit are used in calculating off-street parking stalls (each bedroom is considered separately). Failure to meet parking requirement will not permit a rental license. The formula for required parking is as follows:

Bedroom Square Footage	Parking Stalls Required
70 to 119	1
120 to 169	2
170 to 219	3
220 to 269	4
270<	5

Tandem parking is not allowed in R-1 zoning districts. Limited tandem parking is allowed in other zoning districts. Parking areas are limited to 35% of the front and rear yards. No required parking is allowed in side yards. Size of parking stall = 9' x 19' plus driveway. Minimum of two and maximum of five parking stalls required per dwelling unit. All parking areas and driveways must be hardsurfaced with concrete or asphalt. Recycled asphalt is not an acceptable method of hardsurfacing.

***If the property is located in an R-1 or R-2 District the occupancy of the property is limited to Family -Traditional OR Family – Functional. Other types of occupancies are NOT allowed in the R-1 and R-2 Districts. (See definitions below)***

1. Family - Traditional. A traditional family means one or more persons related by blood or marriage residing in a single dwelling unit.
2. Family - Functional. A functional family means a collective group of unrelated persons residing in a single dwelling unit, limited to not more than two adult persons, together with their traditional family members of any age.

I have read the above and understand the occupancy limits associated with this property \_\_\_\_\_  
(Applicant's initials)

**MORE ON THE OTHER SIDE – MAKE SURE TO READ AND COMPLETE ALL INFORMATION →**

\_\_\_\_\_ APARTMENT(S) (TRIPLEX, FOURPLEX, OR GREATER)  
Two parking stalls required for each unit, 9' x 18' plus driveway.  
Number of units \_\_\_\_\_  
Number of units which are (1 bdrm \_\_\_\_\_ 2 bdrm \_\_\_\_\_ 3 bdrm \_\_\_\_\_ Other \_\_\_\_\_)  
Number of stories: \_\_\_\_\_ Any unit owner occupied? \_\_\_\_\_ Yes \_\_\_\_\_ No If yes, which unit? \_\_\_\_\_

\_\_\_\_\_ MOBILE HOME - Number of bedrooms \_\_\_\_\_ Size of structure \_\_\_\_\_  
Is this owner occupied? \_\_\_\_\_ Yes \_\_\_\_\_ No Do renters share any common areas? \_\_\_\_\_ Yes \_\_\_\_\_ No  
If yes, which areas? \_\_\_\_\_  
Number of bedrooms rented: \_\_\_\_\_

**FOR ALL APPLICATIONS:**

- 1. **SCALED FLOOR PLAN IS REQUIRED – ATTACH COPY. MINIMUM 8 ½ “ X 11” PLAN SIZE.**
- 2. **SCALED SITE PLAN IS REQUIRED. DEPICT THE LOCATION OF PARKING STALLS ON THE PROPERTY, DISTANCE TO PROPERTY LINE, SIZE OF PARKING STALLS – ATTACH COPY. MINIMUM 8 ½ “ X 11” PLAN SIZE.**

I hereby certify that all information contained herein is true and accurate. I hereby grant permission of the City of Mankato to make inspections of the structure listed herein to determine its compliance with City Codes. I agree to maintain the premises to standards, which are set forth by the City of Mankato. I understand that failure to complete the necessary code requirements within sixty (60) days from the date of the initial inspection will result in my application being withdrawn and voided. I also understand that per Chapter 5 of the City Code, I need to be up to date on all financial obligations relative to real property within the City and not have any outstanding/unpaid bills (licenses, utility bills, property taxes, etc.).

I hereby certify that the agent listed herein (if any) is authorized to receive summons and complaints on behalf of the owner. The owner and /or agent agree to promptly notify the City of any change in agent or transfer of ownership.

I certify that I have requested a background check for the agent/property manager listed on this application, pursuant to MN Statutes § 299C.68.

**I understand that payment made with this application has been accepted for the purpose of applying for a rental license and that such acceptance does not constitute an automatic granting of a rental license. The rental/occupancy of the property is not permitted until a rental license has been issued and received. I also understand that the application fee will not be refunded if a rental license is denied due to failure of the property to comply with the Zoning Ordinance or the Housing Code. Application will not be processed without signatures and required plans.**

APPLICANT'S SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

AGENT'S SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

ZONING ADMINISTRATOR: The property is located in a \_\_\_\_\_ zoning district. (In R-1 & R-2 zoning districts the occupancy is limited to Family – Traditional or Family – Functional)  
Maximum number of dwelling units allowed on the property \_\_\_\_\_.  
Number of conforming parking stalls located on the property: \_\_\_\_\_.  
Number of bedrooms \_\_\_\_\_.  
A variance was (granted) (denied) for \_\_\_\_\_ (attached letter)

Inspected by \_\_\_\_\_ Date: \_\_\_\_\_

BUILDING INSPECTOR: The structure has been inspected and is in compliance with the City's Housing Code.  
A variance was granted for \_\_\_\_\_ (attached letter)

Inspector: \_\_\_\_\_ Date: \_\_\_\_\_

CITY CLERK: The rental license for this property was issued on \_\_\_\_\_

TO CASHIERS: This is a NEW RENTAL application. Ring up payment. There should not be a license in the file for this property. If there is, immediately notify the Clerk's Office.

DATE PAID: \_\_\_\_\_

AMOUNT PAID: \_\_\_\_\_