



## Non-Owner Occupied Structures (Rental) Registration Form

### RENTAL PROPERTY INFORMATION

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip \_\_\_\_\_

Property Type : Single Family \_\_\_\_\_ Duplex \_\_\_\_\_ Multi-Family \_\_\_\_\_ Commercial \_\_\_\_\_

Is Owner Occupying Property Yes \_\_\_\_\_ No \_\_\_\_\_

\*If you are registering multiple structures, please use one form for each structure.

### PROPERTY OWNER

Name \_\_\_\_\_ Business Name (If Applicable) \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone #: \_\_\_\_\_ Emergency Phone #: \_\_\_\_\_

Email: \_\_\_\_\_

### PERSON MAINTAINING PROPERTY

Name \_\_\_\_\_ Business Name (If Applicable) \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Daytime Phone #: \_\_\_\_\_ Emergency Phone #: \_\_\_\_\_

Email: \_\_\_\_\_

### RENTAL OCCUPANCY REPORT

In conformance with Massillon Income Tax Codified Ordinance 181.18 Tenant Reports, the timely providing of the attached occupancy report will constitute proper filing of the required Tenant Report with the City's Income Tax Administrator. **Please fill out the attached report and submit it with this form (not to the Income Tax Dept.)**

### REGISTRATION FEE

Non-Owner Occupied (Rental) Registration Fee: \$50.00 / \$30.00 Additional Units

**MAKE CHECK OR MONEY ORDER PAYABLE TO: CITY OF MASSILLON**

Submit form and payment:

Code Enforcement

151 Lincoln Way East, Massillon, OH 44646

330.830.1724 | Fax 330.830.1782 | [www.massillonohio.com](http://www.massillonohio.com)

**\*\*I agree that all standards set forth in Chapter 1330 of the  
Massillon City Codified Ordinances will be met\*\***

Owner Signature \_\_\_\_\_

Date \_\_\_\_\_

### FOR OFFICE USE

Parcel# \_\_\_\_\_

Payment Date \_\_\_\_\_

Payment Method \_\_\_\_\_

Check # \_\_\_\_\_ Amount Paid \_\_\_\_\_



## Mandatory Rental Occupancy Report

In conformance with Massillon Income Tax Codified Ordinance 181.18 Tenant Reports (a) (b) (c), the timely providing of the attached occupancy report will constitute proper filing of the required Tenant Report with the City's Income Tax Administrator. This report must be kept current with all rental properties within the City of Massillon. You have 30 days after a new tenant occupies or vacates the property to inform the Income Tax Department. **This report is mandatory and must be kept up to date on an ongoing basis.** Please use additional forms if necessary.

### PROPERTY OWNER

Name \_\_\_\_\_ Business Name (If Applicable) \_\_\_\_\_  
Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Phone #: \_\_\_\_\_ Email \_\_\_\_\_

### TENANT #1 INFORMATION

Name \_\_\_\_\_  
Spouse (Other) \_\_\_\_\_  
Rental Address \_\_\_\_\_  
Unit # \_\_\_\_\_ Date of Occupancy \_\_\_\_\_ Vacating \_\_\_\_\_  
Telephone # \_\_\_\_\_ Email \_\_\_\_\_  
Forwarding Address \_\_\_\_\_

### TENANT #2 INFORMATION

Name \_\_\_\_\_  
Spouse (Other) \_\_\_\_\_  
Rental Address \_\_\_\_\_  
Unit # \_\_\_\_\_ Date of Occupancy \_\_\_\_\_ Vacating \_\_\_\_\_  
Telephone # \_\_\_\_\_ Email \_\_\_\_\_  
Forwarding Address \_\_\_\_\_

### TENANT #3 INFORMATION

Name \_\_\_\_\_  
Spouse (Other) \_\_\_\_\_  
Rental Address \_\_\_\_\_  
Unit # \_\_\_\_\_ Date of Occupancy \_\_\_\_\_ Vacating \_\_\_\_\_  
Telephone # \_\_\_\_\_ Email \_\_\_\_\_  
Forwarding Address \_\_\_\_\_

### FORM SUBMISSION / CHANGE OF STATUS

Submit this form or any change of occupancy status to:

City of Massillon Income Tax Department • P.O. Box 910 • Massillon, OH 44648-0910

Questions: 330-830-1709 • [incometax@massillonohio.com](mailto:incometax@massillonohio.com)

Owner Signature \_\_\_\_\_

Date \_\_\_\_\_