



CITY OF FOREST

105 East 1st Street
P. O. BOX 298
FOREST, MISSISSIPPI 39074

RID : _____

DATE: _____

RENTAL PROPERTY REGISTRATION FORM

Property Information

Company/Owner's Name: _____

Property Address: _____ Apt# _____

Owner's Name _____

Owner's Mailing Address: _____, City _____, Zip _____

EMAIL: _____ Phone # _____

Is Power Available: Yes No Is Water Available: Yes No

Basic Information Concerning Inspection

Owner must call the Department of Community Development within 30 days of date of registration to schedule 1st inspection.

Applicant must initial each after reading:

_____ Owner must call the Department of Community Development within 30 days of date of registration to schedule 1st inspection.

_____ A Certificate of Compliance must be issued in order for this dwelling to be released for occupancy.

_____ Failure to comply with this procedure within 30 days will result in disconnection of utility services and a reconnect fee may be charged.

**For any questions regarding rental registration or inspections please contact
Department of Community Development at 601-469-2251**

OFFICE USE ONLY

Inspector notes: _____

Certificate of Compliance Issued Date: _____

Inspector's signature _____