



**\*Pre-Registration Application\***

Village of Orland Park  
Development Services Department  
14700 Ravinia Avenue  
Orland Park, IL 60462  
Phone (708) 403-5300 Fax (708) 403-6215  
Email: developmentservices@orlandpark.org

**Residential Rental Housing Pre-Registration Application (Please Print)**

<b>Type of Application:</b>	<input type="checkbox"/> New Rental Registration	<input type="checkbox"/> Change of Address/Phone
	<input type="checkbox"/> Change of Owner	<input type="checkbox"/> Change of Agent

<b>Rental Property Street Address:</b>	<b>P.I.N. #</b>
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<input type="checkbox"/> Is there a property owner's association associated with this location?	<input type="checkbox"/> Yes <input type="checkbox"/> No
• Association Name: _____	Telephone Number: _____
<input type="checkbox"/> Do you own other rental property in Orland Park, Illinois?	<input type="checkbox"/> Yes <input type="checkbox"/> No
• How many? _____	Please list all addresses here: _____

<b>Type of Property:</b>	<input type="checkbox"/> Single Family Home	<input type="checkbox"/> Duplex	<input type="checkbox"/> Townhome	<input type="checkbox"/> Condominium
	<input type="checkbox"/> Apartment Building – Number of Units _____ Number of Parking Spaces associated with property _____			

**Legal Property Owner Information: (Street address is required, do not use PO Box information)  
(If In Trust – see bottom of next page for requirements)**

<b>Name:</b>	<b>Address:</b>		
<b>E-Mail Address:</b>	<b>City:</b>	<b>State:</b>	<b>ZipCode:</b>
<b>Business Phone:</b>	<b>Mobile Phone:</b>	<b>Home Phone:</b>	

**24 Hour Contact Emergency Phone Number \*\*REQUIRED\*\***

**Local Agent Information: (Required for all owners not living within a 30 mile range of the Village of Orland Park, IL)**

<b>Name:</b>	<b>Address:</b>		
<b>E-Mail Address:</b>	<b>City:</b>	<b>State:</b>	<b>ZipCode:</b>
<b>Business Phone:</b>	<b>Mobile Phone:</b>	<b>Home Phone:</b>	

**24 Hour Contact Emergency Phone Number \*\*REQUIRED\*\***

<b>Fees:</b>	<b>Annual Fee:</b>	Single Family Detached Residence \$100.00 per unit	
		Single Family Attached Residence(including all townhomes) \$100.00 per unit	
		Multi-Family Residence \$100.00 + \$15.00 per additional unit within the same building	
		(Re-inspection fees and fines as stated in Village Code 5-8-3-3)	
			\$

I, the Owner/Agent for the above property understand the completion of this application and payment of fees does not constitute an official rental housing license. I grant permission and access to Village authorized personnel to complete an inspection to verify compliance with the Rental Housing Code (VC 5-8-1) I verify that this application is complete and truthful to the best of my knowledge. I understand that renting a dwelling without a valid license issued by the Village of Orland Park is a violation of the Village of Orland Park Code and will result in enforcement by fines and a court appearance; the property may be deemed uninhabitable until the license is obtained.

**Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

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<b>STAFF ONLY</b>	<b>Date Received:</b>		<b>Fee Paid:</b>	
	<b>Approved:</b>		<b>Denied:</b>	

<b>Dwelling Unit Information:</b>							
<input type="checkbox"/> Single Family	<input type="checkbox"/> Duplex	<input type="checkbox"/> Townhouse/Condo	<input type="checkbox"/> Apartment Building				
<b>Number of Units:</b>							
Efficiency Units:		Square Feet Living Area:					
1 Bedroom Units:		Square Feet Living Area:		2 Bedroom Units:		Square Feet Living Area:	
3 Bedroom Units:		Square Feet Living Area:		4 Bedroom Units:		Square Feet Living Area:	

<b>Tenant Information:</b>		
	<b>LESSEE NAME</b>	<b># of Occupants</b>
Unit 1		
Unit 2		
Unit 3		
Unit 4		
Unit 5		
Unit 6		
Unit 7		
Unit 8		
Unit 9		
Unit 10		
Unit 11		
Unit 12		
Unit 13		
Unit 14		
Unit 15		
Unit 16		

<b>If property is held In Trust – Trust Information required per Village of Orland Park Code</b>							
<b>Name:</b>		<b>Address:</b>					
<b>E-Mail Address:</b>		<b>City:</b>		<b>State:</b>		<b>ZipCode:</b>	
<b>Business Phone:</b>		<b>Mobile Phone:</b>		<b>Home Phone:</b>			

**Please attach additional sheet if more space is required for any information above!**

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