



*Town of Delmar*  
 100 SOUTH PENNSYLVANIA AVENUE  
 DELMAR, DELAWARE-MARYLAND 21875  
 (302) 846-2664 & (410) 896-2777 FAX (410) 896-9055

Date: \_\_\_\_\_ APPLICATION# \_\_\_\_\_

**TOWN OF DELMAR, DELAWARE**

Application and Temporary Certificate for license of a rental unit.

- \_\_\_\_\_ Single Family Unit
- \_\_\_\_\_ Unit of Two-Family Residence
- \_\_\_\_\_ Unit of Multi-Family Residence
- \_\_\_\_\_ Unit of Apartment Building
- \_\_\_\_\_ Other \_\_\_\_\_

I, \_\_\_\_\_, the legal owner of the dwelling located at \_\_\_\_\_, do hereby apply for a license to rent the above dwelling unit in the **Town of Delmar, Delaware**. I understand that by this application, I give permission for inspection of the property to determine if this property is in compliance with **Ordinance 46** of the **Town of Delmar, Delaware**. This inspection may be performed without the necessity for obtaining any further permission or judicial warrant, except that the **Town of Delmar** will provide me and/or my tenant at least ten (10) days notice prior to any interior inspection or to require any tenant to allow entry for such inspection. Refusal to grant the Town Inspection permission to conduct an interior inspection shall constitute sufficient reason for the denial issuance of rental license or temporary certificate. **Owners are responsible for payment of the quarterly utility bill. Any unpaid bills incurred by failure to assume responsibility will result in a lien on the property.**

\_\_\_\_\_  
Owner/Agent

Owner's Name: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 Phone: \_\_\_\_\_

Agent's Name: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 Phone: \_\_\_\_\_

Tenant's Name: \_\_\_\_\_  
 Number of people living in dwelling: \_\_\_\_\_  
 Phone: \_\_\_\_\_

Upon signature below, this application shall serve as a temporary certificate pending inspection and license, as provided by the Town of Delmar, Maryland.