

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, MARYLAND
Application and Te	emporary Certificate for license of a rental unit.
Unit of M	amily Unit wo-Family Residence ulti-Family Residence partment Building
I,atthe above dwelling give permission fo <i>Ordinance 671</i> of the necessity for o <i>Delmar</i> will provide inspection or to reconspection permission denial issuance of	, the legal owner of the dwelling located, do hereby apply for a license to rent unit in the <i>Town of Delmar, Maryland</i> . I understand that by this application, I rinspection of the property to determine if this property is in compliance with the <i>Town of Delmar, Maryland</i> . This inspection may be performed without btaining any further permission or judicial warrant, except that the <i>Town of</i> le me and/or my tenant at least ten (10) days notice prior to any interior quire any tenant to allow entry for such inspection. Refusal to grant the Town sion to conduct an interior inspection shall constitute sufficient reason for the rental license or temporary certificate. Owners are responsible for payment of bill. Any unpaid bills incurred by failure to assume responsibility will
Owner's Name: Address:	Owner/Agent
Phone: Email:	
Agent's Name: Address:	
Phone: Email:	
Tenant's Name: Number of people Phone:	living in dwelling:
Upon signature b	pelow, this application shall serve as a temporary certificate pending inspection and license, as provided by the Town of Delmar, Maryland.

Town Manager/Designee

MARYLAND DEPARTMENT OF ENVIRONMENT (MDE) LEAD POISONING PREVENTION PROGRAM LOCAL GOVERNMENT RENTAL REGISTRY CHECKLIST

In order to aid all local government agencies that have their own local rental registry programs in meeting the statutory requirements of Article 24, Political Subdivisions, 18-101, MDE has included a helpful checklist that should streamline the process. MDE's Lead Poisoning Prevention Program recommends that your agency use this form and determine the following prior to authorizing renting or leasing residential property.

Complete for each dwelling unit.						
1)	Is the residential property an "affected property", i.e., YES NO residential rental property built before 1978?					

2)	Property Owner's Name: _ Address: _					
3)	Property Address: _ 					
4)	If IIVEC!! to #4 above been the manufactor		VEO	NO		
4)	If "YES" to #1 above, has the prop	perty been registered	YES	NO		
5)	If "YES" to #1 above, is the property registration renew current for this year?		YES	NO		
6)	Provide the tracking number (formerly referred to as the owner registration number).					
7)	Did the current tenant move in on or after 2/24/1996?		YES	NO		
8)	If "YES" to #8, provide the Lead Inspection Certificate Number for the current tenancy as required under §6-815 (c) of the Environment Article.					
9)	After 2/24/2006, all affected properties in which a person at risk resides or regularly spends 24 hours per week, and of whom the owner has been notified in writing, must satisfy the risk reduction standard specified in §6-815 (a) of the Environment Article. A person at risk is a child under the age of 6 years or a pregnant woman.					
Copy of statement of compliance attached.			YES	NO		

REVISED - Feb 2024