Residential Rental License Application

SUBMIT COMPLETED APPLICATION AND CHECK OR MONEY ORDER IN THE AMOUNT OF $93.50 PAYABLE TO: CITY OF SUGAR LAND

IN PERSON:
City of Sugar Land/ Treasury
Rental Licensing Program
2700 Town Center Blvd. N.
Sugar Land, TX 77479

BY MAIL:
City of Sugar Land
Rental Licensing Program
P.O. Box 110
Sugar Land, TX 77487

INCOMPLETE OR ILLEGIBLE APPLICATIONS WILL BE RETURNED.

Address of Rental Property:_____

Is this a Renewal Application? Yes☐ No☐ **Is the Property vacant?** Yes☐ No☐

OWNER INFORMATION **License Number -**

(A) OWNER/INDIVIDUAL MAIL? Yes☐ No☐		**(B) OWNER COMPANY, CORPORATION PARTNERSHIP (IF APPLICABLE)** MAIL? Yes☐ No☐	
Name:		Name:	
Mailing Address:		Mailing Address:	
	Box/Unit/Apt:		
City:		City:	
State:	Zip:	State:	Zip:
Date of Birth:		Agent/Managing Partner:	
Driver's License #:		Driver's License # :	Date of Birth:
DL Issuing State:		Mailing Address To Accept Service of Process:	
Primary Phone #:		Primary Phone #:	
Secondary Phone #:		Secondary Phone #:	
Fax Number:		Fax Number:	
E-Mail Address:		E-Mail Address:	

MANAGEMENT COMPANY or EMERGENCY CONTACT INFORMATION MAIL? Yes☐ No☐

Management Company: _____

Or Emergency Contact: _____

Agent's Name *(Natural Person)*: _____

Address: _____

City: _____ Zip: _____

Primary Phone #: _____ Secondary Phone #: _____

Email Address: _____ Fax Number: _____

OWNER OR AGENT SIGNATURE REQUIRED **TITLE** **DATE**