

## city of Portland Housing SAFETY OFFICE www.portlandmaine.gov/housingsafety housingsafety@portlandmaine.gov

Portland City Hall, Room 26 389 Congress Street Portland Maine 04101 (P) 207-756-8131 (F) 207-756-8150

#### RENTAL HOUSING REGISTRATION FORM

Revised 11-30-2015

Page 1 of 3

Chapter 6, Article VI of the City of Portland Code of Ordinances requires owners and managers to register rental units with the City of Portland Housing Safety Office. A rental unit is any portion of any residential structure that is rented or available to rent for any length of time to an individual(s) who is not the owner(s). Registration is due annually by January 1 of each year beginning January 1, 2016 and within thirty (30) days of purchasing a property used for rental. The registration fee is \$35 per individually rented room and/or dwelling unit. Failure to register may result in a fine.

Complete the Rental Housing Registration Form and Owner's Pre-Inspection Checklist for each rental property (multiple rental units at the same property with the same owner can share the same form) and return to the City of Portland Housing Safety Office by email to <a href="https://example.com/housingsafety@portlandmaine.gov">housingsafety@portlandmaine.gov</a> as a digital PDF along with any scanned attachments. Paper and scanned forms will be accepted by fax, mail, and in person; however, digital PDF forms are preferred. After the registration information and fee discount documentation has been verified, an invoice for payment will be sent by email to the party certifying registration entered below.

SECTION 1: PROPERTY INFOR	MATION		
Street Number Street Name AT/ANT	C 5/	Tax Account Number 2462	CBL- Chart, Block, Lot Number (e.g. 001A_A001)  016 A00 9001
SECTION 2: OWNER INFORMA	ATION		
Owner(s) First Name	Owner(s) Last Name		Primary Telephone Number
ROBERT	HA 144		207 657-4277
Kobert Mailing Address Box 18	SRAY WE	04039	Email Address  Thaley A SURAIVE AGE  splain: Q YA hoo . Pi m
Owner is a /an:	Partnership Corporation		plain: Qyahoo, rim
authorized agent must be an individual w	ent for purposes of service. If propert ho resides in the State of Maine.	y owner is a partnership, corpor	ration, LLC or any other form of business entity, the
Registered Agent First Name	Registered Agent Last Name		Telephone Number
Mailing Address	<b>L</b>		Email Address
SECTION 4: PROPERTY MANA Property Manager Name	GER (if different than owner)		Telephone Number
Mailing Address	•		Email Address
SECTION 5: EMERGENCY CON	TACT		
Emergency Contact Name  FCBCRT L	NAlay	No. of the last of	Telephone Number 207 657 427 7
SECTION 6: RENTAL UNIT REG	ISTRATION		
If known, list unit numbers and/or room number		apartment number 1,2,3, 4-11)	Number of rental units registering
#1 #1A #Z	. #24 #3.	# 34	6
To the best of my knowledge	e, I certify that the inforn	nation being register	red is true and correct.
Name (print only)	•		Telephone Number
Relationship to Property	<u>/147</u>	Date	20763/92//
0 w NR	•	12/29/1	207657 4277  Email Address  This ley Insurance
		1 - 4 - 7 -	Marca 6 (14)



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#### OWNER'S PRE-INSPECTION CHECKLIST

Revised 11-30-2015

Page 3 of 3

This pre-inspection checklist will help prepare you for your initial basic life safety rental housing safety inspection.

Complete this checklist and return it with your Rental Housing Registration Form.

BUILDING INFO	ORMATION		
Tax Account Number	CBL-Chart, Block, Lot Number (e.g. ###XX#####)  616 900 9001	Street Number Street 91-93 BHIANXIC ST	

LIFE	SAFETY CHECKLIST	YES	NO	NA	Comments
1.1	Is there a working smoke alarm (detector):	1			
	On each level of the building and dwelling unit and in the vicinity of each bedroom, including the basement?				
	b. In each bedroom?	V			
1.2	Is there a working carbon monoxide (CO) alarm (detector) on each level of the building and dwelling unit including the basement?	/			
1.3	Does each dwelling unit have two separate ways out?	V			
1.4	Are all ways out of the building:				
	a. Free of obstructions?	V			
	b. Automatically or permanently lighted?	/			
	c. Have doors that are fire-rated, self-closing, easily opened, and able to be used?	V			
	d. Discharge at the ground level?				
1.5	Do all exit stairways have handrails that are securely mounted?	V	_		
1.6	If there is only one way out of a dwelling unit, does each bedroom have a window that can be easily opened and is large enough for emergency rescue or escape?			V	

NA - not applicable

CODE REI	FERENCE (NFPA 101, City Code of Ordinances Chapter 6 and 10)
Question	Code Explanation
1.1	There must be a working smoke alarm (detector) on each level of the building and dwelling unit including the basement and in the immediate vicinity of each bedroom or room used for sleeping as well as in each bedroom.
1.2	There must be a working carbon monoxide (CO) alarm (detector) on each level of the building and dwelling unit.
1.3	Each dwelling unit must have access to at least 2 separate ways out of the building that are not located close together unless the unit has an exit door opening to the outside at ground level, an enclosed stair used only by that unit opening to the outside at ground level, or access to an outside stair that serves no more than 2 units.
1.4	The way out of the building cannot be used for storage or trash containers. The way out of a building must be permanently lighted or by lighted by automatic means. Doors leading from a dwelling unit to a stairwell must be self-closing and fire rated. Locks or door hardware must be easy to use when leaving the building. Exits must lead to the ground level, not the basement.
1.5	All stairs must have handrails that are easy to grasp and that are securely mounted at a height between 34" and 38" measured from the leading edge of all treads, vertically to the handrail.
1.6	Each bedroom must have a window that can be opened without using tools or special knowledge. The opening of the window must be at least 20" wide and 24" high and provide an opening of 5.7 square feet. The bottom of the opening must be less than 44" above the floor.



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Discount Requested	(The total discount may not exceed \$20.00 per rental unit)  Attach Required Verification Documents	Discount	Number of rental units for which a discount is being requested
Fully Sprinklered Building	Testing Report OR Maintenance Report OR Maintenance Contract	\$10.00/unit	6
Centrally Monitored Fire Alarm	Fire Department Logs OR Alarm Contract	\$7.50/unit	
Housing Quality Standard (HQS) Inspection	HQS Inspection Report From Preceding Year	\$5.00/unit	
Uniform Physical Condition Standard (UPCS) Inspection	UPCS Inspection Report From Preceding Year	\$10.00/unit	
No Smoking Lease	Copy of Signed Lease	\$2.50/unit	

DID YOU COMPLETE:

Rental Housing Registration Form Owner's Pre-Inspection Checklist

Attach all fee discount verification documents if requesting discount

EMAIL ELECTRONIC FORMS AND ATTACHMENTS TO:

housingsafety@portlandmaine.gov

PAYMENT INFORMATION:

Following verification of registration information and fee discount documentation you will receive an email sent to the email address of the party certifying registration (found at the bottom of the first page).

Pay the invoiced amount to complete your rental housing registration:

- in person by cash, check, or credit card;
- by mail by check; or
- online by credit card or check.

FOR MORE INFORMATION:

See www.portlandmaine.gov/housingsafety

PAYING BY CHECK:

Make checks payable to: City of Portland, Housing Safety

PLEASE NOTE INVOICE NUMBER, TAX ACCOUNT NUMBER, OR CBL ON CHECK

FOR OFFICIAL USE ONLY		
	Total Number of Rental Units Registering	
	Registration Fees (\$35 x Number of Rental Units)	
CBL- Chart, Block, Lot Number	Total Fee Discounts (not to exceed \$20.00 per rental unit)	
Account Number	TOTAL FEES DUE	



Portland Water District

Send Correspondence to

Address: 225 Douglass St. P.O. Box 3553 Portland, ME 04104-35

Office Hours: 8:00 a.m. - 4:30 p.m. Monday through Friday Phone: 207.761.8310

Web Site and E-Mail www.pwd.org customerservice@pwd Customer Name HALEY ROBERT Account Number 175186-01

Service Address 91 ATLANTIC ST PORTLAND

Payment due by 12/28/2015.

Page 1 of 1

Account Detail:	MEMBER WATER CHARGES	WASTEWATER CHARGES	TOTAL
PREVIOUS BALANCE			\$24.07 cr
BALANCE FORWARD			<b>\$24.07</b> cr
CURRENT CHARGES			
Private Fire Protection	\$3.45	\$0.00	\$3.45
Total Current Charges	\$3.45	\$0.00	\$3.45
TOTAL AMOUNT DUE			\$20.62 CR

Sprinkler System

ACCT # 2462 (BL 016 A00 9001

F = Fireline

#### **CREDIT BALANCE-DO NOT PAY**

### YOUR 13 MONTH CONSUMPTION SUMMARY (Hundred Cubic Feet)

Month	Water	Waste Water	Days
140	10.20	<b>1994</b>	
		-	
	<u> </u>		
	<del>                                     </del>		<b> </b>
	<del></del>	<del> </del>	
	İ	L	
undred Cı	ıbic Fee	t = 748	Gallons

**Customer Meter Summary:** 

**METER TYPE:** P = Primary S = Submeter R = Reverse Submeter

METER METER READ PRIOR BILL CURRENT PRIOR CONSUMBTION
NUMBER TYPE DATE READ DATE DATE METER READING METER READING (HCF)

Notes -