

# LANDLORD LICENSE CHECKLIST



**All information must be complete and all required documents available or the landlord license application package will not be accepted. No partially complete applications or documents will be accepted.**

## **Fees:**

- \$50 per building Landlord License fee
- \$100 per unit Rental Inspection fee (when applicable)

## **Application Checklist:**

Property Owner: \_\_\_\_\_

- Completed and signed Landlord License Application
- Completed and signed Landlord License Worksheet
- Completed and signed Rental Inspection Application (inspections required every two years)
- Copy of property insurance (Declarations page)
- Proof of ownership (New applications only)

## **Applications may be hand delivered, mailed, or emailed to:**

City of North Chicago  
Economic and Community Development  
1850 Lewis Avenue  
North Chicago, Illinois 60064  
[inspections@northchicago.org](mailto:inspections@northchicago.org)

# LANDLORD LICENSE APPLICATION



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## Property Owner(s) Information (Attach additional sheets as necessary):

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

EMAIL: \_\_\_\_\_

PHONE: \_\_\_\_\_ EMERGENCY PHONE: \_\_\_\_\_

**P.O. boxes will not be accepted as an address.**

## Property Manager Information:

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

EMAIL: \_\_\_\_\_

PHONE: \_\_\_\_\_ EMERGENCY PHONE: \_\_\_\_\_

**P.O. boxes will not be accepted as an address.**

I hereby affirm that all the information provided is current and correct.

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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## For Office Use Only:

Amount Paid: \_\_\_\_\_ Date Paid: \_\_\_\_\_

License Number/Verification: \_\_\_\_\_

Department of Economic and Community Development

1850 Lewis Avenue, North Chicago, Illinois 60064 | (847) 596-8650 | inspections@northchicago.org

# LANDLORD LICENSE WORKSHEET



## Rental Property Information:

Address of Rental Property	PIN Number	Single-Family	Duplex/2-Flat	Multi-Unit (# of Units)

City Code (5-14-8) requires any owner, manager, or designee of a residential rental property to utilize a crime free lease addendum or have a clause in the lease similar to a crime free lease addendum for any leases executed.

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

# RENTAL/SALE INSPECTION APPLICATION



Application for Inspection shall be made by the owner, lessee (if permission has been granted by the owner), or an authorized agent of either. The final inspection must be completed and approved before issuance of a Certificate of Occupancy/Compliance. A Certificate of Occupancy/Compliance must be obtained before use of the premises or structure is allowed. No inspection shall be conducted if fees, fines, liens, etc. are owed to the City in relation to, or associated with, this application. Signing this application states that the applicant has read and understands the statements and all the information the applicant declares is true and binding. **If a rental unit is occupied, the tenant must be present for the inspection along with the owner or agent. If the tenant is not present, permission in the form of a notarized letter signed by the tenant must be available to the inspector at the time of the inspection or the inspection will not be performed.**

**Cancelations must be made at least twenty-four (24) hours in advance of the scheduled inspection time to avoid penalty fees for missed or no-show inspection appointments per the City of North Chicago Code of Ordinances.**

ADDRESS OF PROPERTY REQUIRING INSPECTION: _____
OWNER OR AGENT NAME: _____
OWNER/AGENT ADDRESS: _____
CITY: _____ STATE: _____ ZIP: _____ EMAIL: _____
PHONE: _____ MOBILE PHONE: _____

**Inspection Type Requested:**

Rental Inspection (Certificate of Compliance)  
Sale Inspection (Certificate of Occupancy)

**Is the Unit Owner Occupied:**

Yes  
No

**Type of Unit:**

Single Family Home  
Multi-Unit Residence (Number of Units): \_\_\_\_\_  
Non-Residential (Type of Use): \_\_\_\_\_

**Is the Unit Vacant:**

Yes  
No

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

**For Office Use Only:**

Inspection Date: \_\_\_\_\_ Inspection Time: \_\_\_\_\_

Building Official: \_\_\_\_\_ OC#: \_\_\_\_\_

Rental/Sale Fee: \_\_\_\_\_