



CITY OF ASHLAND

Supplemental Rental Registry

The Rental Registry is intended to improve communications between the City of Ashland and Ashland landlords.

OWNER, PROPERTY MANAGER OR LOCAL AGENT INFORMATION

Company Name (if property manager): _____

Owner/Manager Name: _____ Primary Phone: _____

Address: _____ Secondary Phone: _____

City, State, Zip: _____ Total Number of Addresses: _____

Email: _____

PROPERTY INFORMATION *(If more than 3 properties, please list on the back)*

#1
 Rental Property Address: _____ Ashland, Oregon

Number of Units Studio _____ 1BR _____ 2 BR _____ 3 (or more) BR _____ Total _____

#2
 Rental Property Address: _____ Ashland, Oregon

Number of Units Studio _____ 1BR _____ 2 BR _____ 3 (or more) BR _____ Total _____

#3
 Rental Property Address: _____ Ashland, Oregon

Number of Units Studio _____ 1BR _____ 2 BR _____ 3 (or more) BR _____ Total _____

SMOKE AND CARBON MONOXIDE ALARM CERTIFICATION

I hereby certify the rental properties that I have an ownership interest in, or manage, within the City of Ashland are in substantial compliance with the Oregon Revised Statutes ORS Ch 479.250-479.300 and OAR 837-045-0040, including having fire alarms installed on each floor, in all hallways leading to the bedrooms and in each bedroom, if required at the time of construction. All battery operated smoke alarms are equipped with a 10-year battery, electrically operated smoke alarms have battery backups, and all smoke alarms are equipped with a hush feature. Additionally, within rental units with a carbon monoxide source, carbon monoxide alarms are installed and operable within 15 feet of each bedroom in accordance with ORS 90.316-90.325 and OAR 837-047-0100.

_____ Property Owner or Manager Signature

For additional information about the **Rental Registry** please call the Housing Department at (541) 552-5305.

For questions regarding the **Business License** please call the City of Ashland Customer Services Division at (541) 488-6004

FOR OFFICE USE ONLY

Application Received Date: _____ Date registered _____ / Initials _____

