Village of Carol Stream

Residential Rental License

Application Instructions

The Village of Carol Stream requires that every person operating a residential rental property within the Village obtain a license for said property. The licensing requirement applies to all rental apartments, condominiums, townhomes, and single family homes. Several exceptions apply including; dwellings rented to immediate family members, hotels/motels, nursing homes/retirement homes/rest homes/hospices/etc., and state regulated group homes.

Please follow the instructions below when completing your license application.

1) Complete, in entirety, the Residential Rental License application. Be sure to include information for a local agent if the legal owner resides outside of Illinois. A separate application is required for each property owned.

2) Arrange for payment of the license fee. Fees may be paid in person at the Municipal Center or by mail. If you cannot pay at the time of application, you will be sent an invoice for the license fee. Fees are to be paid within 30 days and are assessed as follows:

   $75.00 per individual dwelling unit (condo/townhome/single family); or
   $100.00 per multi-family apartment building (as defined by address number)

3) Register to attend a Crime Free Multi-Housing Seminar. Available dates and times are posted on the Carol Stream Police Dept. webpage: https://www.carolstream.org/departments/police-department/police-programs-and-services/crime-free-multi-housing-program

Once you have attended the seminar and paid your license fee, your application will be approved and returned. The rental license is good for one year. The renewal process will be the same as initial application; however, attending the Crime Free seminar is only required one time. The rental license is non-transferable.

If you have any questions please contact the Crime Free Housing Coordinator:

Dino Heckermann at (630) 871-6214 checkermann@carolstream.org
Application for:
Residential Rental License

Complete and return to:
500 N. Gary Ave., Carol Stream, IL 60188
Fax: (630) 668-2397

Date of Application: ________________________

Address of Rental Property: ______________________________________________________________

Property Type:  ☐ Apartment: Number of Buildings: ___________ Total Units: ___________
☐ Condominium ☐ Townhome ☐ Single Family Dwelling

LEGAL PROPERTY OWNER INFORMATION
Full legal names, addresses, and home and business phone numbers of every firm, partnership, limited liability corporation or other entity and every officer and its registered agent of a corporation is required. Trust beneficiaries must also be disclosed, including percentage of ownership. Attach additional pages if more space is needed. P.O. Boxes are NOT acceptable.

☐ Individual ☐ Firm ☐ Partnership ☐ LLC ☐ Other: ____________________________________________

Name of Legal Owner(s): __________________________________________________________________________

Address/City/State/Zip: __________________________________________________________________________

Primary Contact Person/Title: ___________________________ E-Mail: ___________________________

Home Phone: ___________________ Business Phone: ___________________ Mobile Phone: _________________

24-Hour Emergency Contact (Name/Phone #): ________________________________________________________

LOCAL AGENT INFORMATION (Required for all legal owners living outside the State of Illinois)
Full name, address, and home and business phone numbers of property manager/management company. Attach additional pages if more space is needed, or to list additional persons. P.O. Boxes are NOT acceptable.

Name of Local Agent(s): __________________________________________________________________________

Address/City/State/Zip: __________________________________________________________________________

Home Phone: ___________________ Business Phone: ___________________ Mobile Phone: _________________

Primary Contact Person/Title: ___________________________ E-Mail: ___________________________

Home Phone: ___________________ Business Phone: ___________________ Mobile Phone: _________________

24-Hour Emergency Contact (Name/Phone #): ________________________________________________________

I, the undersigned, do hereby acknowledge and agree to the following:

1. The information in this application is true and correct.
2. I have read and understand Chapter 10.12 Residential Rental License of the Carol Stream Code of Ordinances.
   (Available at www.carolstream.org or at the Carol Stream Village Hall)
3. The Village of Carol Stream shall be notified of any change of information within ten (10) days.
4. I, the owner or local agent, shall be reasonably accessible to the Village at any time, and shall maintain a local office available for contact in Illinois.
5. An inspection and re-inspection of the property may be conducted to determine whether the property is in compliance with the Residential Rental License ordinance or other applicable ordinances of the Village of Carol Stream.

Signature: ___________________________________________________________ Date: _____________________________

Preferred Document Delivery Method: ☐ E-Mail ☐ U.S. Postal Service

Note: This signed application shall serve as the temporary rental license issued by the Village of Carol Stream.