

**2024 Exempt Rental Permit/Registration**

Property Owner's Information

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ Zip: \_\_\_\_\_

Email: \_\_\_\_\_

Phone: \_\_\_\_\_

-

Exempt Property Information

Address: \_\_\_\_\_

Reason for Exemption:

Family     Trust     Empty

Signature of

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

Return or mail to:

City of Washington

% Rental Inspections

215 E. Washington St.

Washington, IA 52353