

1250 Tiger Blvd, Suite 4 • Clemson, SC 29631-2662 (864) 653-2050 Fax (864) 653-2057

Rental Housing Program Permit Application

Please complete all information and submit to the Planning and Codes Administration office. The Rental Housing License will not be issued until the office has received this information.

Property Address		Date Purchased	
Owner's Name			
Owner's Address (physical address required)			
City, State, Zip Code			
Owner's Phone No.			
Owner's Email			
Agent's Name			
Agent's Address (physical address required)			
City, State, Zip Code			
Agent's Phone No.			
Agent's Email			
Occupancy of Unit			
On the back of this document please (or by attachment) provide a drawing of the parking area with the parking spaces numbered.			
Addition Address/P.O. Box			
I have read and understand the City of Clemson Rental Housing Regulations also known City of Clemson South Carolina Code of Ordinances Chapter 13 Article III.			
Owners Signature	Date Agen	ts Signature	Date