



Mail to: **MICHIGAN CITY FIRE DEPARTMENT**
2510 EAST MICHIGAN BLVD.
MICHIGAN CITY, INDIANA 46360
BUS 219-873-1440 FAX 219-873-1451

Smoke Detector Rental Property Registration Form
NO P.O. BOX ALLOWED FOR ANY ADDRESS ON THIS FORM
STREET ADDRESSES ONLY

PROPERTY LOCATION _____

Date of Registration: _____

Authorized Agent: _____ Address: _____

Phone Number: (_____) _____

Address for service of process:

If not property location above: _____

_____ Address

Phone Number: (_____) _____

The undersigned hereby affirms under penalties of perjury that the above listed statements are true and that I have received a copy of the applicable ordinance and I am in compliance there with.

Print Owner Name

Owner Signature

Date: _____