

**OGDEN CITY BUSINESS LICENSING
GOOD LANDLORD INCENTIVE PROGRAM
WAIVER APPLICATION**

Applicant's full name: _____

Applicant's date of birth: _____

Applicant's contact telephone number: _____

Name and contact telephone number of applicant's parole officer: _____

- I understand that a waiver shall be valid for **one year**.
- I understand that I am required to renew a waiver **on an annual basis**.
- I agree to provide Ogden City business licensing with a BCI report (current to within thirty 30 days) upon renewal.
- **I understand I must present a copy of this application to a prospective landlord and the landlord or landlord's agent must contact Ogden City business licensing, at 801-629-8687, to confirm that a waiver has been granted.**

REVOCACTION:

I understand that a waiver may be revoked under the following circumstances:

- Waiver tenant fails to renew the waiver annually;
- Waiver tenant fails to present a current BCI report to Ogden City business licensing every twelve (12) months;
- Waiver tenant is convicted of a crime listed in subsection 1745-4.A.3 of the Ogden Good Landlord policy;
- Waiver tenant obtains a disqualifying RIM level.

APPEAL:

I understand I may appeal the denial or revocation of a waiver to a hearing officer by filing a written appeal with the office of the city recorder within thirty (30) days of the denial or revocation and shall include the required twenty five dollar (\$25.00) filing fee. I shall have the burden of proving that the waiver should be granted or otherwise not revoked.

AUTHORIZATION TO RELEASE INFORMATION:

I, _____, certify that the above information is true and correct as of the date of this application, and agree that the Ogden City Police Department is authorized to contact my parole officer and that AP&P is authorized to release my RIM level, or equivalent, and other private information to the Ogden City Police Department, if requested.

Applicant Signature: _____

Date: _____

APPLICANT SHALL RETAIN A COPY OF THIS RECORD TO PRESENT TO PROSPECTIVE LANDLORD

THIS RECORD IS CLASSIFIED AS PRIVATE PURSUANT TO UTAH CODE ANN. SECTION 63G-2-302.

FOR OFFICIAL USE ONLY:

Employee Initials _____

Copy of ID to verify identity:

Yes: _____ Date: _____

No: _____

If renewal: receipt of a copy of BCI report current to within thirty (30) days of date of application:

Yes: _____ Date: _____

No: _____

Waiver Granted:

Yes: _____ Date: _____

No: _____

Landlord/Agent contacted Ogden City business licensing:

Yes: _____ Date: _____

No: _____

Name and Contact Information for Landlord or Agent:

Address of Waiver Tenant: _____

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