

FEE: \$50.00

**RESIDENTIAL – RENTAL**  
**INSPECTION REQUEST**

(OFFICE USE ONLY)

DATE: \_\_\_\_\_

HILLSIDE ADDRESS: \_\_\_\_\_

**OWNER INFORMATION**

NAME \_\_\_\_\_

ADDRESS: \_\_\_\_\_

HOME NO. \_\_\_\_\_ WORK NO. \_\_\_\_\_

**TENANT INFORMATION**

MOVE IN DATE: \_\_\_\_\_

NUMBER OF TENANTS: \_\_\_\_\_

NAMES OF  
TENANTS: \_\_\_\_\_

CONTACT NUMBER: \_\_\_\_\_

Who will be responsible for the water bill? \_\_\_\_\_

Does the owner want a copy of water bill if tenant is responsible? \_\_\_\_\_

**NOTE: Call Public Works for a final water reading @ 708-202-3434**  
**Owners are responsible for all unpaid water usage.**