City of New Albany Rental Unit
Registration and Inspection Program
142 East Main Street, Suite 206
New Albany, IN 47150
812-948-5371
rentalregistration@cityofnewalbany.com

REQUEST FOR INSPECTION

In accordance with the New Albany City Plan Commission and [Ordinance G-01-19, Chapter 7.16 et seq], each Rental Unit and/or Rental Premises within the City may be inspected if the Rental Housing Officer or his or her designee receives a complaint that a Rental Unit does not comply with applicable code requirements.

Name _____

Rental Unit Address _____

Phone Number _____ E-Mail _____

Are you current on your rent payments? ☐ Yes ☐ No

Have you contacted your landlord/property manager about the issue? ☐ Yes ☐ No

Reason for Request (must be a violation of the Rental Housing Code, Chapter 7.17 of the Zoning Ordinance):

_____

_____

_____

_____

_____

Signature _____ Date_____

FOR OFFICE USE ONLY

Form received by: ☐ **E-Mail** ☐ **Phone** ☐ **Mail** ☐ **In Person**

Form received by (name): _____

Form received on (date): _____

Date of last inspection (if applicable): _____

Does the property need an inspection:

☐ Yes

☐ No