



YPSILANTI BUILDING DEPARTMENT

One South Huron ♦ Ypsilanti, MI 48197
Phone: (734) 482-1025 ♦ Fax: (734) 483-7444
www.cityofypsilanti.com

New Date Request for Rental Inspection

***** FORM TO BE COMPLETED BY OWNER OR REGISTERED AGENT ONLY *****

Property Location: _____

Property Owner/Agent Information:

Name:	Phone:		
Mailing Address:	City:	State:	Zip:
Email address:			

Request is for:

- A later date? An earlier date? (Subject to availability)

In the space below, provide the reason(s) you wish to change the date of your inspection. Please provide any dates and/or times that you are not available to avoid any scheduling conflicts. Be advised that if your inspection report lists any health and safety violations your request will be denied until those items are corrected. Due to the high volume of inspections conducted by this office, our policy is to grant only one (1) rescheduling. You will be notified by mail and/or email once a decision is made. **Please Note:** Requests received less than 72 hours prior to scheduled inspection will result in a late cancellation fee.

Owner/Registered Agent Signature: _____

Please Print Name: _____ Date: _____

Office Use Only

Request Approved Request Denied Reviewed by: _____

New Inspection Date and Time: _____

Reason for Denial: _____