



POSSESSION OF PROPERTY CERTIFICATE

Form Revised 4/7/2023

SECTION I – ADDRESS OF PROPERTY – List address exactly as on license application, including unit number.

Address: _____

SECTION II- POSSESSION DETAILS

Applicant (The entity/individual applying for the license): _____

Applicant has possession of the property by way of:

Ownership Lease Sublease

SECTION III – LEASE DETAILS – Only complete if applicant leases OR subleases property.

Note: If the name of the applicant differs from the name of the property owner listed with the Denver Assessor’s Office, please complete this section

Name of property owner/landlord (as on lease/deed):

Name of tenant (as recorded on lease):

**tenant must match the applicant, unless applicant is sub-tenant

Lease start date: _____

Lease end date: _____

Property owner preferred contact info

Name: _____

Phone: _____

Email: _____

SECTION IV – SUBLEASE DETAILS – Complete if applicant subleases property.

Name of sublessor (as recorded on sublease):

**sublessor must match tenant

Name of sub-tenant (as recorded on sublease):

**sub-tenant must match the applicant

Lease start date: _____

Lease end date: _____

Sublessor preferred contact info

Name: _____

Phone: _____

Email: _____

SECTION V – USE OF PROPERTY

The property owner/landlord and any sublessor understand that the applicant intends to use the property for the activities pertaining to the following license type: _____

SECTION VI – OATH OF APPLICATION

I declare under penalty of perjury that I have the legal property rights or have been granted authority by the legal property owner(s), to obtain a license for the property or properties for which I am applying for a license. I also declare that all executed documents are true, accurate, complete, and valid.

Applicant or authorized representative of applicant

Printed name: _____ Signature: _____ Date: _____

Property owner or authorized representative of property owner

Printed name: _____ Signature: _____ Date: _____

Authorized representative of sub-lessor (if applicable)

Printed name: _____ Signature: _____ Date: _____