



**POSSESSION OF PROPERTY CERTIFICATE**

*Form Revised 4/7/2023*

To request an accommodation to access this document, fill out this form: <https://www.denvergov.org/Accessibility>

**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: \_\_\_\_\_