

RENTAL PROPERTY TENANT REGISTRATION FORM

RENTAL PROPERTY INFORMATION

Address: _____ City: _____

Number of Units at this address: _____ Rental Property is Currently: Rented _____ Vacant _____

Rental Property Manager (if different from property owner) _____

Address: _____ Phone: _____

RENTAL PROPERTY OWNER INFORMATION

Name: _____ Phone: _____

Mailing Address: _____

E-Mail: _____

Do you own any other rental properties within the Township? Yes _____ No _____

TENANT / LESSEE INFORMATION (list each person(s) 18 or older who will occupy the residence)

Name: _____ Phone: _____

Tenant's Employer: _____

Name: _____ Phone: _____

Tenant's Employer: _____

Name: _____ Phone: _____

Tenant's Employer: _____

Name: _____ Phone: _____

Tenant's Employer: _____

(If any tenant is not working, write that on the form.)

Term of Rental Agreement: START _____ END _____

In the event of an emergency, please specify any special accommodations that may be required for the tenants in the event of an evacuation:

Please explain: _____

I hereby certify by signing this application that I am the owner and/or authorized agent of said property; and to the best of my knowledge, all provided information herein is complete, accurate, and true.

Signature of applicant: _____ Date: _____