

# TENANT REGISTRATION FORM

BOROUGH OF NEWVILLE

4 WEST STREET

NEWVILLE, PA 17241



Property Owner Name: \_\_\_\_\_

Property Owner Address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_

Email: \_\_\_\_\_

Rental Unit Street Address: \_\_\_\_\_ Newville, PA

List **All** Tenant Names (including children), living in the above Unit. Please include occupational status.

Name	Adult	Child	Date Occupied	Occupational Title/Status

List **All** Tenants (including children) who have vacated the above rental unit.

Name	Adult	Child	Date Vacated	New Address of Move

Property Owners are required to complete a new registration form within thirty (30) days of any change in occupancy. Signature: \_\_\_\_\_ Date: \_\_\_\_\_