CITY OF SHAMOKIN Annual Landlord Registration/License Application For Calendar Year 201__

[Please print using black or blue ink]

A. I	Rental Property Information.				
	Property Address:		Shamokin, PA 17872		
	Tax Parcel No.:				
	Number of Units at this location:	@ \$25.00 per ι	ınit =		
.	O				
В. (Owner/Landlord Information.				
	Name of Owner(s):				
	Street Address (no P.O. Boxes alone):				
	Telephone No.:	E-Mail:			
	Owner is: ☐ Individual(s); ☐ Partnership; ☐ Corporation; ☐ Other (Specify):				
	Does Owner <u>reside</u> within 20 miles of City of Shamokin? ☐ Yes ☐ No.				
	Name of Property Manager: Street Address (no P. O. Boxes alone) [must be within 20 miles of City of Shamokin]:				
	Telephone No.:	E-Mail:			
D. 1	Tenant Information.				
	Complete and attach Tenant Info tenant residing at this location is list		that every rental unit and every		
E. C	Certification.				
and	certify that the information contained on this appropriet to the best of my knowledge and belief, benalties of 18 Pa. C. S. §4904, relating to unsy	I understand that false st	atements herein are made subject to		
S	ignature of Owner/Landlord	Title, if applicable	Date		

Completed Applications together with Applicable Fees may be delivered to or mailed to:

Shamokin City Hall, 47 East Lincoln Street, Shamokin, PA 17872

570-644-0876

OFFICIAL USE ONLY

Street

N/S/E/

Postal No.

Landlord/Owner Name

License into

Date Issued

Lic. No.

S Eas Dair

CITY OF SHAMOKIN Tenant Information Sheet For Calendar Year 201

For Calendar Year 201___ [Photocopy this Sheet if additional Pages are needed]

Property Addre	ess:			
Name of Owne	er/Landlord:			
Unit No	Maximum N	o. of Tenants:	Actual No. of Tenants:	
Tenant			Occupation (if adult)	
Unit No	Maximum N		Actual No. of Tenants:	
Tenant	: Name	Adult (Y/N)	Occupation (if adult)	
Unit No.	Maximum N	lo. of Tenants:	Actual No. of Tenants:	
	t Name	Adult (Y/N)	Occupation (if adult)	

Tenant Information Sheet No. ____ of ____