BOROUGH OF KUTZTOWN COMMUNITY DEVELOPMENT OFFICE

324 WEST MAIN STREET PHONE: 610-683-3290 KUTZTOWN, PA 19530-1606 FAX: 610-683-3537

HOUSING ROSTER

Please type or print legibly.

ADDRESS OF LET PR (List only one property per housing a						
	ŕ	an autu				
Total number of dwelling PROPERTY O			Does	owner live o	 ut let prope	rty? Yes No
NAME(S):			Does	owner we c	ii ici propei	10510
HOME ADDRESS:						
BUSINESS ADDRESS:						
PHONE #'s:	Home		Work		Cel	1
EMAIL ADDRESS:	*					
★ Does owner wish to b	e included in a	ıll mass email no	otifications by	this office?	Yes	No
PROPERTY A	GENT'S INF	ORMATION	Does	agent live a	t let nroner	ty? Yes No
NAME:	GENT STATE	ORMATION	Does	ageni iive a	i ici proper	19105110
HOME ADDRESS:						
BUSINESS ADDRESS:						
PHONE #'s:	Home	1				
EMAIL ADDRESS:	*					
★Does agent wish to be	e included in a	ll mass email noi	tifications by	this office?	Yes	No
TEN	VANT INFOR	MATION		Total num	ber of tena	nts:
	ip lease indi	ividual leases	no lease			
FIRST NAME & MIDDLE INITL		LAST NAME		APT#/ ROOM#	FLOOR	WILL LET PROPERTY FROM - TO
	Indicate by	if undergradu	ate student			- - -
						-
						-
The undersigned: 1) verifies and	believes that the fa		orm are true and o	correct, and unde	erstands that fa	address. lse statements hereon are subject to be numbers listed on this roster are
	Date					
	Date					
Agent's Sign	nature (if applicab	le)	Dat	e		
	B OF THE KUTZ		LURE TO COM	PLY SHALL S	UBJECT THE	S OF OCCURRENCE, AS SET C OWNER AND/OR AGENT TO E.
current year. Late filing is	s subject to penalti nse and/or Housing	es as set forth in Sec	tion 135-4.A of the comply w	he Kutztown Co with the provision	ode. Applican	ble fee on or before July 31 of the t is hereby notified that if the town Code, such Application for
	_	— DO NOT WRIT				
Tracking Number	ate Issued Amended					

TENANT INFORMATION									
FIRST NAME & MIDDLE INITL		LAST NAME		APT#/ ROOM#	FLOOR	WILL LET PROPERTY FROM - TO			
	Indicate by	if undergraduate stude	ent						
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