

CITY OF CONNELLSVILLE



LANDLORD REGISTRATION

Tom Currey

724-628-2020/207

Landlord name: _____

Landlord Address: _____

Landlord Phone #: _____ # Rental Units: _____

Rental unit address #1: _____

Adult occupants full names: _____

_____ # of Minors: _____ Yrs. at address: _____

Rental unit address #2: _____

Adult occupants full names: _____

_____ # of Minors: _____ Yrs. at address: _____

Rental unit address #3: _____

Adult occupants full names: _____

_____ # of Minors: _____ Yrs. at address: _____

Landlord's signature: _____

Rental unit address #4: _____

Adult occupants full names: _____

_____ # of Minors: _____ Yrs. at address: _____

Rental unit address #5: _____

Adult occupants full names: _____

_____ # of Minors: _____ Yrs. at address: _____

Rental unit address #6: _____

Adult occupants full names: _____

_____ # of Minors: _____ Yrs. at address: _____

Rental unit address #7: _____

Adult occupants full names: _____

_____ # of Minors: _____ Yrs. at address: _____

Rental unit address #8: _____

Adult occupants full names: _____

_____ # of Minors: _____ Yrs. at address: _____

Rental unit address #9: _____

Adult occupants full names: _____

_____ # of Minors: _____ Yrs. at address: _____

Mail to: City of Connellsville, 110 North Arch Street, Connellsville, PA 15425
Cost is \$10 per unit. Checks/Money Orders only. Payable to: City of Connellsville