

Township of South Heidelberg

555A Mountain Home Rd, Sinking Spring, PA 19608

(610) 678-9652

Code Enforcement

FOR OFFICIAL USE ONLY

Registration Fee \$ _____ Date _____

Inspection Fee \$ _____ Date _____

Inspector _____ Date _____

Re-Inspect Fee \$ _____ Date _____

Rental Unit Registration and License Application

1. **New Registration** **Renewal** **Change in Owner/Property Manager**

2. RENTAL PROPERTY ADDRESS

Address: _____ City: _____

of Units: _____ Type of Rental Unit: Single-Family Duplex (Two Family) Multi-Family (3+ Units)

3. OWNER INFORMATION

Name: _____ Business Name: _____

Mailing Address: _____ City: _____ State: _____ ZIP: _____

Phone Numbers: Day: _____ Email: _____

Cell: _____ FAX: _____

Emergency Representative: _____

Mailing Address: _____ City: _____ State: _____ ZIP: _____

Phone Numbers: Day: _____ Evening: _____

Cell: _____ FAX: _____

4. PROPERTY MANAGEMENT INFORMATION

Name: _____ Business Name: _____

Mailing Address: _____

Phone Numbers: Day: _____ Email: _____

Cell: _____ FAX: _____

5. RENTAL UNIT(S) INFORMATION *(Attach additional sheets as necessary)*

Unit or Apt # _____ **Number of sleeping rooms in this unit:** _____ **Number of occupants:** _____

List the names of all occupants of this unit including children:

Tenant phone number(s); Home - _____ Cell - _____

Utilities: Owner's Responsibility: Heat Electric Water Sewer Yard Maintenance

Tenant's Responsibility: Heat Electric Water Sewer Yard Maintenance

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List the names of all occupants of this unit including children:

Tenant phone number(s); Home - _____ Cell - _____

Utilities: Owner's Responsibility: Heat Electric Water Sewer Yard Maintenance

Tenant's Responsibility: Heat Electric Water Sewer Yard Maintenance

6. OWNER/AGENT CERTIFICATION – I hereby attest to the truth and accuracy of the information contained in this application and grant the Township of South Heidelberg permission to conduct any and all inspections (if required) and affirm that all tenants of the subject property will be informed of the required and scheduled inspections with twenty-four (24) hours notice. I hereby attest that each residential unit is occupied by not more than one (1) family as defined in the federal Fair Housing Act, as amended, and its regulations.

Signature _____

Printed Name _____

Date _____