Borough of Laureldale
3406 Kutztown Road
Laureldale, PA 19605

Phone: (610) 929-8700
Email: ABeakley@laureldaleboro.org

REGISTRATION FOR RESIDENTIAL RENTAL LICENSE

MAKE CHECK PAYABLE TO
AND MAIL THIS FORM TO:

BOROUGH OF LAURELDALE
3406 Kutztown Road
Laureldale, PA 19605

Account Number
Address

APPLICANT INFORMATION:

Applicant is ☐ Owner/landlord ☐ Property Manager/Agent for Owner

NAME: _____ PHONE #: _____
ADDRESS: _____ PHONE #: _____
ADDRESS: _____ EMAIL: _____

PROPERTY OWNER:

Required if the Name or Address of owner is differnt from the applicant above.

NAME: _____ PHONE #: _____
ADDRESS: _____ PHONE #: _____
ADDRESS: _____ EMAIL: _____

RENTAL UNIT INFORMATION:

Please list Location and unit number of property to be let for occupancy along with the name and telephone number of contact person to schedule compliance inspections if different from the application information above.

LOCATION: _____ PHONE #: _____
CONTACT: _____ PHONE #: _____

OCCUPANT INFORMATION:

Please list the names of all tenants and occupants who will occupy property listed above. List age if occupant is under 18 years of age. Use additional paper to complete list if needed.

NAME: _____ NAME: _____
NAME: _____ NAME: _____
NAME: _____ NAME: _____

TOTAL NUMBER OF RENTAL UNITS : _____ << REQUIRED. APPLICATION FEE @ $25.00 per Property _____

DISCLAIMER OF RENTAL REGISTRATION:

I hereby certify that I am the owner of the above mentioned property and attest that the property is not a residential rental unit as defined in the Borough of Laureldale Ordinance No. 460. ☐ <<< Check here and sign below.

By signing below I verify that subject to penalties if 17 Pa.C.S. Section 4904, relating to unsworn falsifications to authorities, that the above information is accurate:

SIGNATURE OF APPLICANT: _____ DATE: _____

For Office Use Only:

DATE PAID: _____ *LICENSE NO:* _____ *DATE:* _____