

# FORTY FORT BOROUGH

1271 Wyoming Avenue Forty Fort, PA. 18704  
Telephone: (570) 287-8586 Fax: (570) 287-0521

## Residential Rental License Application and Registration

Instructions for completing form:

1. Owners of rental properties must renew license and report occupants annually by the 30<sup>th</sup> of January in the year property is due for inspection.
2. Vacant dwellings must be reported vacant.
3. Tenant's Covenants and Obligations form must be completed and signed and a copy returned with application.
4. Landlord must provide 24 hour emergency contact information for owner or manager.
5. Maximum occupancy is based on 1 tenant per 70 Square feet of living space.
6. **Please type or print legibly.**

Owner Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone #: \_\_\_\_\_ E-Mail: \_\_\_\_\_

Property Location: \_\_\_\_\_

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Applicant certifies all statements made on this application are true. Applicant further certifies:

1. All HUD and/or EPA requirements regarding disclosure of known information on lead-based paint and lead-based paint hazards have been met.
2. This property's electrical system has not been modified after the initial construction or after the latest permitted repairs, whichever occurred last.

Applicant Signature \_\_\_\_\_ Date \_\_\_\_\_

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**Manager (Required if owner resides more than 50 miles from Forty Fort).** Manager must reside within 50 miles of Forty Fort. Emergency 24 hour contact information is required.

Name: \_\_\_\_\_ Phone #: \_\_\_\_\_

Address: \_\_\_\_\_

E-mail: \_\_\_\_\_

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### **Tenants Residing in Landlord's Property:**

UNIT #: \_\_\_\_\_ Primary Tenant: \_\_\_\_\_

Other Occupants: \_\_\_\_\_

Phone: \_\_\_\_\_ Pets: \_\_\_\_\_

Emergency Contact Name: \_\_\_\_\_ Phone: \_\_\_\_\_

List additional units on reverse side

**UNIT #:** \_\_\_\_\_ **Primary Tenant:** \_\_\_\_\_

**Other Occupants:** \_\_\_\_\_

**Phone #:** \_\_\_\_\_ **Pets:** \_\_\_\_\_

**Emergency Contact Name:** \_\_\_\_\_ **Phone:** \_\_\_\_\_

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**UNIT #:** \_\_\_\_\_ **Primary Tenant:** \_\_\_\_\_

**Other Occupants:** \_\_\_\_\_

**Phone #:** \_\_\_\_\_ **Pets:** \_\_\_\_\_

**Emergency Contact Name:** \_\_\_\_\_ **Phone:** \_\_\_\_\_

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**UNIT #:** \_\_\_\_\_ **Primary Tenant:** \_\_\_\_\_

**Other Occupants:** \_\_\_\_\_

**Phone #:** \_\_\_\_\_ **Pets:** \_\_\_\_\_

**Emergency Contact Name:** \_\_\_\_\_ **Phone:** \_\_\_\_\_

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**UNIT #:** \_\_\_\_\_ **Primary Tenant:** \_\_\_\_\_

**Other Occupants:** \_\_\_\_\_

**Phone #:** \_\_\_\_\_ **Pets:** \_\_\_\_\_

**Emergency Contact Name:** \_\_\_\_\_ **Phone:** \_\_\_\_\_

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**UNIT #:** \_\_\_\_\_ **Primary Tenant:** \_\_\_\_\_

**Other Occupants:** \_\_\_\_\_

**Phone #:** \_\_\_\_\_ **Pets:** \_\_\_\_\_

**Emergency Contact Name:** \_\_\_\_\_ **Phone:** \_\_\_\_\_

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**Phone #:** \_\_\_\_\_ **Pets:** \_\_\_\_\_

**Emergency Contact Name:** \_\_\_\_\_ **Phone:** \_\_\_\_\_

Use additional sheets if necessary