

**PORT VUE BOROUGH
PROPERTY REGISTRATION FORM**

PROPERTY OWNER'S NAME: _____

PROPERTY OWNER'S ADDRESS: _____

PROPERTY OWNER'S PHONE NUMBER: (____) _____

PROPERTY AGENT/MANAGER NAME: _____

PROPERTY AGENT/MANAGER ADDRESS: _____

PROPERTY AGENT/MANAGER PHONE NUMBER: (____) _____

LOCATION OF PROPERTY: _____

NUMBER OF UNITS: _____

The above mentioned property is owner occupied and is hereby exempt from the registration under Ordinance #620-2018. Check here if exempt: _____

COMMERCIAL: _____ RESIDENTIAL: _____

LIST ALL OCCUPANTS IN THIS UNIT: USE REVERSE SIDE IF MORE SPACE IS NEEDED

Name: _____ Phone number: _____ # Adults: # Minors

OWNER/AGENT/MANAGER SIGNATURE: _____

Official Use Only:

Date Received: _____ Amount Received: _____

Check No.: _____ Cash: _____

Cc: File