

**CITY OF ALTOONA RENTAL UNIT REGISTRATION PROGRAM**  
**Rental Information Update/Tenant Registration Information**

**ADDRESS OF RENTAL PROPERTY:** \_\_\_\_\_

OWNER NAME \_\_\_\_\_ PHONE NO. \_\_\_\_\_

OWNER ADDRESS: \_\_\_\_\_  
City State Zip Code

OWNER EMAIL ADDRESS: \_\_\_\_\_

**AGENT INFORMATION - REQUIRED IF OWNER RESIDES OUTSIDE OF BLAIR COUNTY**

AGENT NAME \_\_\_\_\_ AGENT PHONE NO. \_\_\_\_\_

AGENT ADDRESS \_\_\_\_\_  
City State Zip Code

AGENT EMAIL ADDRESS: \_\_\_\_\_

NUMBER OF RENTAL UNITS IN PROPERTY: \_\_\_\_\_

NUMBER OF RENTAL UNITS CURRENTLY RENTED: \_\_\_\_\_

IS THIS PROPERTY USED AS A STUDENT RENTAL? YES \_\_\_\_\_ NO \_\_\_\_\_

IS THIS PROPERTY USED AS A ROOMING/BOARDING HOME? YES \_\_\_\_\_ NO \_\_\_\_\_

Chapter 9 of the City of Altoona Code requires property owners who rent or lease property in the City of Altoona to provide to the City a list of tenants eighteen (18) years of age and older who reside in the property. Tenant Registration is required for issuance of a Residential Rental Unit License

**PROVIDE THE NAME AND ADDRESS OF EACH TENANT 18 YEARS OF AGE AND OLDER**

NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

PHONE \_\_\_\_\_

NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

PHONE \_\_\_\_\_

NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

PHONE \_\_\_\_\_

NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

PHONE \_\_\_\_\_

NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

PHONE \_\_\_\_\_

NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

PHONE \_\_\_\_\_

**Additional tenant information may be submitted on a separate sheet of paper or on the back of this sheet. Computer printouts are acceptable.**

**This Department must be notified immediately of any changes to the above information. Failure to provide appropriate changes can result in the Revocation of your Rental Unit License.**

**I do hereby certify that the information provided is true and accurate to the best of my knowledge.**

**Signature of Property Owner** \_\_\_\_\_ **Date** \_\_\_\_\_