



CITY OF ALTOONA RENTAL UNIT REGISTRATION PROGRAM
RENTAL INFORMATION UPDATE/TENANT REGISTRATION INFORMATION

ADDRESS OF RENTAL PROPERTY

ADDRESS:	CITY:	STATE:	ZIP CODE:
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PROPERTY OWNER INFORMATION

NAME:			
PHONE:		EMAIL:	
ADDRESS:	CITY:	STATE:	ZIP CODE:

AGENT INFORMATION

REQUIRED IF OWNER RESIDES OUTSIDE OF BLAIR COUNTY			
NAME:			
PHONE:		EMAIL:	
ADDRESS:	CITY:	STATE:	ZIP CODE:

RENTAL BUILDING INFORMATION

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

TENANT INFORMATION

NAME:		PHONE:	
ADDRESS:	CITY:	STATE:	ZIP CODE:
NAME:		PHONE:	
ADDRESS:	CITY:	STATE:	ZIP CODE:
NAME:		PHONE:	
ADDRESS:	CITY:	STATE:	ZIP CODE:
NAME:		PHONE:	
ADDRESS:	CITY:	STATE:	ZIP CODE:
NAME:		PHONE:	
ADDRESS:	CITY:	STATE:	ZIP CODE:

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