

RENTAL PROPERTY
POLK TOWNSHIP
TENANT REGISTRATION FORM

PO Box 137, 165 Polk Township Road, Kresgeville, PA 18333
Tel. No.: 610-681-5376 Fax No.: 610-681-3063 E-mail: polktwp@ptd.net

Lessor/Leasee Statement
Please refer to the attached instruction information

1. We (I) are leasing or otherwise being caused to be occupied the following residential property (unit) within the Township of Polk.

Property ID (Pin No.): _____

Address of Property:

Owner/Lessor: _____

Owner's Address: _____

Owner's phone #: _____

Owner's E-mail: _____

2. Lessee/Occupant Information (For any occupant over the age of 18 years old)

Occupant 1

Occupant 2

Name: _____

Employer Name: _____

Employer Telephone: _____

Term of Agreement: Start Date _____ *End Date* _____

3. I (We) verify the facts set forth in this application are to the best of my (our) knowledge, information and belief. This verification is made subject to the penalties of Section 4904 of the Crimes Codes (18 Pa.C.S. §4904) relating to unsworn falsification to authorities.

(Lessor Signature)

(Lessor Signature)