

Borough of Sayre

TENANT REGISTRATION



110 W. Packer Avenue Suite 3
Sayre, PA 18840

Yearly Registration Period – September 1st to October 1st

Borough Office Use Only

Owner's Full name and Home (H) Address	Owner's Business Address
Phone Number (H):	Phone Number (B)

Please mark with an X, the type of rental building or dwelling rented. Use separate forms for each building.

Apartment ___ Boarding House ___ Duplex ___ Efficiency ___ Condominium ___ Studio ___ Single Family Home ___ Double (up/down) ___ Single Room Occupancy ___ Other ___ (Please explain on back)	*Rental Building Street Address
Number of rental units in Building or on Premise	

Manager or Landlord: (Full Name) Phone Number (B):	Manager or Landlord: Home Address, City, State, Zip Code Phone Number (H):
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The Adults listed below are occupants in the Building identified by the Rental Address above*

Unit Identification	List all Occupants (Full Name) for each	Unit Identification	List all Occupants (Full Name) for each
1)		10)	
2)		11)	
3)		12)	
4)		13)	
5)		14)	
6)		15)	
7)		16)	
8)		17)	
9)		18)	

Owner's Signature _____ Date _____ Sheet ___ of ___