



Borough of Pottstown

Borough Hall, 100 East High Street
Pottstown, Pennsylvania 19464-9525
610-970-6520 610-970-6599 fax
www.pottstown.org

RESIDENTIAL TENANT LISTING AND RENTAL APPLICATION

PLEASE ALLOW 3-4 WEEKS FOR APPOINTMENTS

Failure to show at scheduled inspection time will incur a fee of \$100.00

Application must be filled in completely in ink and must be legible, or it may be rejected.

CHANGE OF ADDRESS OR CONTACT

TENANT LISTING *Must be submitted by January 31st each year

NEW RESIDENTIAL RENTAL REQUEST (Property not currently registered as a rental with the Borough)

Fees listed for #1, #2 and #3 are required

1. Residential Rental Registration: \$115

2. Residential Rental License: \$10 per unit. # of units _____ \$ _____ (Invoiced biennially thereafter.)

3. Residential Inspection (Invoiced biennially, by zone, thereafter.):

\$135.00 per single family dwelling, or per unit for at least two apartments. # of units _____ \$ _____

\$ 90.00 per apartment for buildings with at least three, but not more than six apartments. # of units _____ \$ _____

\$ 40.00 per apartment for building with seven or more apartments. # of units _____ \$ _____

NEW OWNER OF PROPERTY WITH CURRENT RENTAL LICENSE (with valid/current rental license)

Residential Rental License Administrative Transfer Fee:

\$25.00 per unit: Single family dwelling and Apartments of two-six units: # of units _____ \$ _____

\$10.00 per unit: Apartment building with seven or more apartments: # of units _____ \$ _____

SHORT TERM RENTAL \$30 per unit # of unit/rooms _____ \$ _____ (Invoiced annually thereafter)

REINSTATEMENT OF RENTAL REGISTRATION \$230.00 *Office Use Only

To be used in cases of revocation of rental registration/licensing

1. PARCEL/PROPERTY INFORMATION

Date _____ Parcel ID # 1600 _____

Property Address _____

2. PARCEL/PROPERTY OWNER INFORMATION (Property Management information is to be entered on Page 2):

Legal Ownership Name _____

If LLC, Inc, etc enter name of Business Owner _____

Legal Owner Address (No PO Boxes) _____

Legal Owner Phone # _____ ;Ext _____ Legal Owner Party Cell Phone # _____

Legal Owner Email Address *Print legibly* _____

3. PROPERTY MANAGEMENT/CARETAKER INFORMATION

*If owner lives outside of the Tri-County area (Montgomery/Chester/Berks) you are required to designate a contact person who lives or works within that area.

Type of Contact Emergency Caretaker Property Manager/Agent

Contact Name _____

Contact Address _____

Contact Phone _____;Ext. _____ Contact Cell Phone _____

Contact Email Address *Print legibly* _____

4. ANNUAL TENANT REPORTING BY PROPERTY OWNER

Is any unit Owner Occupied? No Yes; Unit # _____

List all current tenants and unit #'s. If Vacant, note "Vacant".

| Unit # as recorded in Borough Records | Tenant Name (one per space) | Relationship to name on lease (spouse, son, daughter, etc) | Phone # | Date of Occupancy |
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Use separate paper or submit rent roll for additional tenant listing.

5. I hereby verify that the information provided on this form is true and correct to the best of my knowledge, information and belief. I understand false statements herein are made subject to penalties of 18 Pa. C.S.A. § relating to unsworn falsification to authorities.

Form submitted by Owner Caretaker Property Manager/Agent

Date: _____ Printed Name: _____

Signature: _____