

PROPERTY REGISTRATION FORM

IF THE FOLLOWING INFORMATION IS NOT CORRECT, PLEASE PROVIDE PROPER INFORMATION

PROPERTY OWNER'S NAME:
OWNER'S MAILING ADDRESS:

OWNER'S PHONE NUMBER: (_____) _____ (required)

LOCATION OF UNIT: _____
TAX PARCEL NUMBER:
WARD:

PLEASE CHECK IF EXEMPT _____ The above mentioned property is owner occupied and is hereby exempt from registration under Ordinance 1230 as amended by Ordinance 1272.

NUMBER OF UNITS IN BUILDING: _____ PLEASE COPY THIS FORM AS NECESSARY AND COMPLETE THE OCCUPANT INFORMATION FOR EACH UNIT INDICATED

CHECK ALL THAT APPLY: _____ BUSINESS OCCUPANCY _____ RESIDENTIAL OCCUPANCY / APT. NO.: _____

LIST ALL TENANTS IN THIS UNIT

NAME	Date of Birth & Social Security Number	PHONE NO	NAME / ADDRESS OF EMPLOYER

IF COMMERCIAL OR INDUSTRIAL DESCRIBE TYPE OF BUSINESS:

I CERTIFY TO THE BEST OF MY KNOWLEDGE AND BELIEF THAT THE INFORMATION GIVEN FOR THE FORGOING PROPERTY IS TRUE AND CORRECT.

PLEASE SIGN AND RETURN (437 Butler St. Pittsburgh, PA 15223)

OWNERS SIGNATURE: _____ DATE: _____