Please complete this form and return with your payment in person, or mail to: City of Uhrichsville, 305 E. 2^{nd} St. Uhrichsville, Ohio 44683

Landlord Registration Form for Uhrichsville, Ohio

Rental Property Address or Addresses:

N. observations	(5	. 00	NA	
Number of Units:				
Owner:				
Owner's				
Address:				Owner
Phone:	Email	Address:_		
Property Manager:				
Property Manager Phone:				
Current Tennant(s)			How many total:	
Tennant's				
Phone:				(This is in
case of an emergency, such	as a fire, so we know who	to contact ar	d how many live there)	
Signature of Owner:			Date:	
Office use only				
Date received:	Paid by:	Check #:	Amount:_	