

Date _____

TENANT INFORMATION FORM

Willistown Township

688 Sugartown Road

Malvern, PA 19355

Phone 610.647.5300

Fax 610.647.8156

Pursuant to Ordinance 3 of 1991, all property owners must report, in writing before July 15th of each year, the tenants that occupy rental units on the owner's property.

Landlord Information:

Address _____ City _____ State _____ Zip _____

Property Owner's Signature _____

Please Print Name _____ Telephone Number _____

Rental Property Information:

Rental Property #1

Name of Leaseholder(s) _____

Address _____ City _____ State _____ Zip _____

Rental Property #2

Name of Leaseholder(s) _____

Address _____ City _____ State _____ Zip _____

Rental Property #3

Name of Leaseholder(s) _____

Address _____ City _____ State _____ Zip _____

Please submit a separate sheet with additional rental property information if applicable.