

Borough of West Chester



Rental & Student Home Registration Form
Please..... Type or Print Clearly

1. Address of Rental Property:

2. Name(s) of Owner(s) *(please supply copy of recorded deed):*

Street Address:

City, State & Zip Code:

Telephone Numbers:

Home: _____

(Please include area code)

Work: _____

Fax Number:

Email Address: _____ **(please print clearly)**

3. Name of Responsible Agent:

(Required if owner is outside a 5 mile radius of the Borough Of West Chester)

Street Address:

City, State & Zip Code:

Telephone Numbers:

Home: _____

(Please include area code)

Work: _____

4. Single Family, Two Family Dwelling or Apartments:

Total Number of Dwelling Units: _____

Total Number of Residential Dwelling Units being Rented: _____

Rooming House Use Only:

Total Number of Rooming Units: _____

Total Number of Rooming Units Being Rented: _____

5. Type of Premises: (Check One)

- Single Family Dwelling
- Apartment House (3 or More)
- Rooming House
- Apartment Complex
- Mixed Use (i.e., store/office; apartment(s))

