

<input type="checkbox"/> <b>NEW / RENEWAL</b> <i>(Payment Required)</i> <b>\$20 per unit</b>  <p style="text-align: center;"><b>OR</b></p> <input type="checkbox"/> <b>CHANGE OF TENANT</b>	<b>RENTAL UNIT REGISTRATION</b> ***** <b>BOROUGH OF STROUDSBURG</b> <b>700 SARAH STREET</b> <b>STROUDSBURG, PA 18360</b> Phone (570) 421-5444 Fax (570) 421-2690 <a href="http://www.StroudsburgBoro.com">www.StroudsburgBoro.com</a> Please Print Additional Forms From Website	<b>*OFFICE USE ONLY*</b> <b>PAYMENT INFO</b>  AMOUNT: \$ _____ CHECK #: _____ DATE: _____  REC'D BY: _____
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**Property Information**

Address of Owned Property:		<b>**REQUIRED**</b>
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If your property has multiple street addresses, please use a DIFFERENT form for EACH ADDRESS.

**Property Owner Information**

Owner Name:			
Mailing Address:			
Phone Number:		E-mail:	
<b>PROPERTY MANAGER INFO</b>	<i>All property owners who are not FULL-TIME residents of Monroe County <b>MUST</b> designate a property manager who resides within the County.</i>		
Property Manager Name:			
Phone Number:		E-Mail:	
Signature:	Date:	<input type="checkbox"/> Property Owner <input type="checkbox"/> Manager	

**Residential Tenant Information (\$20 Per Unit, Annually)**

<b>UNIT #</b> _____	<b>FLOOR #</b> _____	(List Adult Tenants Only)
Full Name		
Email		Phone
<b>UNIT #</b> _____	<b>FLOOR #</b> _____	(List Adult Tenants Only)
Full Name		
Email		Phone
<b>UNIT #</b> _____	<b>FLOOR #</b> _____	(List Adult Tenants Only)
Full Name		
Email		Phone
<b>UNIT #</b> _____	<b>FLOOR #</b> _____	(List Adult Tenants Only)
Full Name		
Email		Phone

**COMMERCIAL / BUSINESS RENTALS ONLY (NO FEES)**

Business Name:	Unit #	Floor #
Business Name:	Unit #	Floor #
Business Name:	Unit #	Floor #

<input type="checkbox"/> <b>I CERTIFY THAT THERE ARE NO RESIDENTIAL RENTALS AT THIS ADDRESS.</b>	
_____	<b>PROPERTY OWNER / MANAGER SIGNATURE</b>