

**TOWN OF BLOOMSBURG
OFFICE OF CODE ENFORCEMENT & ZONING
RENTAL UNIT LICENSE APPLICATION (PURSUANT TO ORDINANCE NO. 949)**

PROVISIONAL LICENSE: _____ REGULAR LICENSE: _____

ADDRESS OF SUBJECT PROPERTY: _____
(ONLY ONE ADDRESS PER APPLICATION)

NUMBER OF DWELLING UNITS WITHIN STRUCTURE: _____ (SEE OTHER SIDE)

NAME OF PROPERTY OWNER: _____

ADDRESS: _____

TELEPHONE: _____ CELL PHONE: _____

E-MAIL ADDRESS: _____

IF PROPERTY IS OWNED BY A PARTNERSHIP OR CORPORATION, THE NAMES, ADDRESSES AND CONTACT INFORMATION OF ALL PARTNERS IS REQUIRED. THIS INFORMATION IS TO BE PRINTED ON A SEPARATE SHEET OF PAPER AND ATTACHED TO THIS APPLICATION.

NAME OF AGENT OR MANAGER: _____

ADDRESS: _____

NOTE: The identified agent or manager must be available in the event of an emergency and said individual must reside within TEN (10) miles of the rental property.

TELEPHONE: _____ CELL PHONE: _____

E-MAIL ADDRESS: _____

TENANTS: _____

ATTACH ADDITIONAL SHEET IF NECESSARY

SIGNATURE OF OWNER OR AGENT

DATE

PER SECTION 11-203.2.A.(2): UPON SIGNATURE OF THIS PROVISIONAL LICENSE APPLICATION THE APPLICANT AND OR OWNER ACKNOWLEDGES THAT THERE ARE NO KNOWN DEFECTIVE CONDITIONS OF THE RENTAL PROPERTY THAT WOULD BE A HAZARD TO THE OCCUPANTS.

OFFICE USE ONLY:

APPLICATION RECEIVED BY: _____ DATE: _____

TOTAL FEES COLLECTED: _____ DATE: _____

IF STRUCTURE IS AN APARTMENT HOUSE/COMPLEX WITH MULTIPLE UNITS PLEASE LIST THE ADDRESS OF EACH UNIT.
Example: Second Floor Rear Apt., Third Floor Front Apt., etc.

UNIT 1:

UNIT 2:

UNIT 3:

UNIT 4:

UNIT 5:

UNIT 6:

UNIT 7:

UNIT 8:

UNIT 9:

UNIT 10:

UNIT 11:

UNIT 12:

UNIT 13:

UNIT 14:

UNIT 15:

UNIT 16:

UNIT 17:

UNIT 18:

UNIT 19:

UNIT 20:
