

LANDLORD REGISTRATION FORM

Street Address:	Block:	Lot:	No. of units/apts.:
-----------------	--------	------	---------------------

The name and address of the **record owners**. If such owners are a partnership, the name of all general partners. If such owners are a corporation, the name and address of the registered agent and corporate officers:

Name:	Phone:
Address:	

If the address of any record owner is not located in the county in which the premises is located, the name and address of a person who resides in the county in which the premises are located and is authorized to accept notices from a tenant and to issue receipt therefore and to accept service of process on behalf of the record owner:

The name and address of the **managing agent** of the premises:

Name:	Phone:
Address:	

The name and addresses, including the dwelling unit, apartment or room number of the **superintendent, janitor, custodian** or other individual employed by the record owner to provide regular maintenance service:

Name:	Phone:
Address:	

The name, address and telephone number of an individual representative of the record owner or managing agent who may be reached or contacted at any time in the event of an **emergency**:

Name:	Phone:
Address:	

The name and address of every **holder of a recorded mortgage** on the premises:

--

If fuel oil is used to heat the building and the landlord furnishes the heat in the building, the name and address of the fuel oil dealer servicing the building, and the grade of fuel oil used.

Name:	Address:
-------	----------

Signature of Owner: _____

Date: _____

Received by: _____