
TOWNSHIP OF SPRINGDALE

OCCUPANCY REGISTRATION FORM (Per Ordinance No. 257)

Account No. _____

\$5.00 Filing Fee

1. Move in Date: _____

2. Name and Address of Owner/Landlord: _____

3. Address: _____

3a. Telephone: _____ Email: _____

4. Type of Structure: Single Family _____ Duplex _____ Multi-Dwell _____

Commercial _____ Industrial _____ Other-Explain: _____

5. If Apartment Building: Number of Apartments _____

6. If commercial or industrial describe type of business and names of occupants:

7. Head of Household

Name _____ Telephone: _____

Cell: _____ E-mail: _____

Address: _____

Present Employer: _____ Date Employed: _____

Address of Employer: _____

If not employed, are you: _____

Retired, unemployed, laid off, etc. (date of last employment)

8. Spouse/Other Resident

Name _____

Employer _____ Date Employed _____

Address of Employer _____

If not employed, are you _____

Retired, unemployed, laid off, etc.

(see page two)

9. Children Living in Household (Names and Ages)

If employed, give name and address of employer, date of employment:

10. List names, employers, date employed of other occupants living in your house or Apartment/s that are not listed above: _____

You are required to complete and return this form (per Ordinance No. 257) before occupying the premises. Failing to file will result in a fine not to exceed \$600. Your cooperation will be appreciated.

Wage Tax is taken out by your employer. You are required to complete a Residency Certification Form and Springdale Township's PSD Code is: 710104.

I certify to the best of my knowledge and belief that the information given for the foregoing is true and correct.

Printed Name: _____

Signature: _____

Date: _____