

WEST CONSHOHOCKEN BOROUGH
112 FORD STREET
WEST CONSHOHOCKEN, PA 19428
OFFICE 610-828-9747 FAX 610-828-9646

RESIDENTIAL RENTAL LICENSE APPLICATION

Address of Dwelling: _____ Number of Units: _____

Name of Owner: _____ Telephone: _____

Address: _____

Cell Phone: _____ Email Address: _____

Borough Code requires that all rooming units, apartment units and single and multitenant dwelling units for rent supply the following information to aid in the assessment of proper licensing.

It is mandatory that all information on this form be completed before it is submitted to the Borough. An Earned Income Tax Form shall be executed by each tenant.

Special requirements are needed for application of a multitenant license. If any of the tenants are students, this property must comply with the Borough of West Conshohocken's Zoning Ordinance.

Tenant # 1
Name:

Tenant # 2
Name:

Tenant # 3
Name:

Daytime Phone/Cell Phone #

Daytime Phone/Cell Phone #

Daytime Phone/ Cell Phone #

Name & Address of Employer

Name & Address of Employer

Name & Address of Employer

Rental Property Annual Fee Due January 1st of each year.

License Fee: Single Unit \$75.00. License Fee: Multitenant \$150.00 (4 or over non-related)

_____(Applicant's name (print)) verifies that the statements in this application are true and correct to the best of his/her knowledge, information and belief are made subject of 18 PA C.S.A. Section 4904 relating to unsworn falsification to authorities.

Date

Applicant's Signature