



# Town of Cheswold Rental Property Registration Form

*In accordance with Ordinance 05-04-15-009*

Name of Property Owner(s):

Type of Ownership:

- Private
- Sole Proprietorship
- Partnership
- Non-Profit Organization
- Management Company
- Artificial Entity (Corp)
- Other:

Parcel ID:

Owner's Mailing Address:

Name of Person Completing Form

Print:

Property Location:

Signature:

Primary Phone:

Phone:

Emergency 24hr Contact & Address

Unit Number(s)

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Emergency 24hr Phone

Fax Number:

Email Address

*Please fill out Page 2 for every owner  
and/or officer.*

E.I.N. Number

*Please fill out Page 3 for every rentor.*

Name of Owner or Officer:

Name of Owner or Officer:

Address:

Address:

Date of Birth:

Date of Birth:

Contact Number:

Contact Number:

Name of Owner or Officer:

Name of Owner or Officer:

Address:

Address:

Date of Birth:

Date of Birth:

Contact Number:

Contact Number:

Name of Owner or Officer:

Name of Owner or Officer:

Address:

Address:

Date of Birth:

Date of Birth:

Contact Number:

Contact Number:

Name of Rentor:

Additional Adults at Residence:

Location of Rental Property:

Phone Number:

Name of Rentor:

Additional Adults at Residence:

Location of Rental Property:

Phone Number:

Name of Rentor:

Additional Adults at Residence:

Location of Rental Property:

Phone Number: