



Maxatawny Township – 127 Quarry Road, Kutztown, PA 19530
Phone: 610-683-6518 – **RENTAL APPLICATION**

Subject: Rental Application
Parcel ID:
Location:

PLEASE COMPLETE THE FOLLOWING FOR THE HOUSING PERMIT. **PLEASE DO NOT PUT SAME AS LAST YEAR - APPLICATION NEEDS TO BE FILLED OUT COMPLETELY OR IT WILL BE RETURNED** - PLEASE PRINT CLEARLY - APPLICATION FEE:

Does Owner occupy any portion of the property? Y/N: ____ If yes, provide owner occupancy details _____

Number of Tenants: _____ Total Occupants (If owner occupied): _____

Tenant Names: _____
**Please attach list of names as necessary, use the other side or attached sheet if required. (All Adults must be listed) DO NOT PUT SAME AS LAST YEAR*

Date of Last Heater Service & Name of Provider _____
Type of Heating System: _____
Fireplace or Alternate Heat Source? Yes or No (Circle One) If Yes, Describe: _____

If Private Water Source: When was the Water Last Tested: _____ By Whom: _____
What Were the Results: _____

IF THIS SPACE IS CHECKED _____, IT MEANS PROPERTY INSPECTION IS DUE - PLEASE CALL TO SCHEDULE - PERMIT WILL NOT BE ISSUED IF INSPECTION IS DUE AND YOU DO NOT CALL TO SCHEDULE THE INSPECTION.

If this is a New Rental, Complete all below. If this is a Rental with an Existing Permit and There Have Been No Changes to the Items Below, Initial and Date Here: No Changes _____.

SQ FT of Building: _____ No. of Bedrooms: _____ No. of Bathrooms: _____ No. of Living Rooms: _____
Type of Sewage Disposal: _____ Type of Water Supply: _____
Number of Off-Street Parking Spaces: _____

This form is to be completed and submitted with applicable Fee.
Late filing is subject to penalties as set forth in Township regulations. If the application submitted is incomplete or does not comply with the provisions of the Township Ordinance, such Housing permit application shall be returned. Application Fee must be included with this application.

I/We Acknowledge the information listed above to be true and correct and request a Housing Permit.

Printed name of Owner or Authorized Agent: _____ Date: _____

Signature (Owner or Authorized Agent) _____

Owner Phone: _____ Alternate Phone: _____ Email: _____