



P.O. BOX 100 ALBRIGHTSVILLE, PA 18210 / TEEPEE (570) 722-0302, FAX (570) 722-2061, EMAIL: OFFICE@TOWAMENSING.COM

2017 Landlord Registration Form

Property Owners Name:

Property Owners Phone Number: _____

Email Address: _____ Fax Number: _____

Will you be renting Your home(s) with Full-Time Tenants or Part-Time Renters? _____

Name of Real Estate Agent/Property Manager: _____ Phone: _____

If renting Part-Time, who is authorized to pick-up rental Packets? _____

Please List All your properties which are on the Rental Program:

Lot #: _____ 911 No. _____ Street: _____

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NOTES TO LANDLORD:

Please send this completed form by either Mailing to our P.O. Box 100, Email or Fax. TTPOA **will not** honor any authorization without a completed Landlord Form. For Landlords renting their homes part-time or seasonal, your signed Vacation Rental Behavior Policy must be included.

TTPOA does not allow registration of ATV's, Snowmobiles, Golf Carts or Boats to persons other than Property Owners or Full Time Tenants with Lessee Affidavit Form on File.

I understand that Part Time Renters will not be issued 8 wristbands without the Property Owner or Property Manager initialing for them on the Part Time Registration Form.

8 wristbands allowed No Exceptions.

I have read a copy of the Rules of Conduct Revised January 2017.

Signature of Property Owner: _____ Date: _____