



WARWICK TOWNSHIP
 Dept. of Planning & Zoning
 1733 Township Greene, Jamison, PA 18929
 (215) 343-6100
www.warwick-bucks.org

For Warwick Township Use Only

Received by: _____

REAL ESTATE DEED REGISTRATION

Date of Acquiring Title: _____

Manner of Acquiring Title: _____

Former Owner (Grantor): _____
Name in Full

Present Owner (Grantee): _____
Name in Full

Property Address: _____

Block & Unit: _____ Parcel: 51- _____ Zoning District: _____

Identify Number of Units _____ Check if Condo Unit

Identify Zoning Use:

- | | | | |
|--|---|--|----------------------------------|
| <input type="checkbox"/> Residential | <input type="checkbox"/> Owner Occupied | <input type="checkbox"/> Tenant Occupied | <input type="checkbox"/> or both |
| <input type="checkbox"/> Non-Residential | <input type="checkbox"/> Owner Occupied | <input type="checkbox"/> Tenant Occupied | <input type="checkbox"/> or both |

Proposed Use of Property: _____

If property will be leased give name of lessee/occupant: _____

Starting Date of Lease: _____ Length of Lease: _____ Expiration Date of Lease: _____

Name of lessor/owner: _____

Address lessor/owner: _____

NAME(S) & ADDRESS(S) OF PARTICIPATING OF SELLING REAL ESTATE BROKERS AND/OR AGENTS:

NAME	ADDRESS	CITY/STATE/ZIP
------	---------	----------------

NAME	ADDRESS	CITY/STATE/ZIP
------	---------	----------------

As per Ordinance 2009-01, the deed and the form must be submitted to the Township within 2 days of recording; failure to do so will result in fines, as established by the Warwick Township Fees Schedule. This Real Estate Registration form must be delivered to Warwick Township at the address above with a copy of the deed and an application fee of \$10.00.

SIGNATURE OF OWNER OR AGENT _____ **Date:** _____