TOWNSHIP OF WARWICK TENANT IDENTIFICATION Form (Commercial) DATE:

Warwick Township Ordinance No. 99-01 proposes to efficiently identify tenants of leased property within the municipality. You are required to notify the Township of the identities of new tenants within thirty (30) days of execution of the lease. Your are also required to annually report the home address of tenants and/or the principal office address of commercial, industrial or institutional tenants by January 31st.

FAILURE TO RETURN THIS FORM OR OTHERWISE COMPLY WITH THE TERMS OF ORDIANCE 99-01 WILL RESULT IN A MINIMUM FINE OF SIX HUNDRED DOLLARS (\$600.).

(Ordinance is available for inspection at the Township office)
Please print

PROPERTY OWNER - (Lessor):					
Name		Pho	Phone #		
Mailing Address	s: street	city	state	zip code	
TENANT (S) –					
Rental Property	Address				
Business Name:					
Business Owner	(if privately owned	l):			
Last		Last Name	Fin	First name	
Contact person:					
	Last Name	First Name			
Mailing Address	s (If different from a	above)	Da	ate of Occupancy	

This form will not be accepted unless it is filled out completely in all areas that apply.

Return completed form to: Edward A. Pfeiffer, Fire Marshal

Warwick Township Building

1733 Township Greene, Jamison, Pa. 18929

Fax: 215-343-4407 Or e-mail same information to epfeiffer@warwick-township.org. Email receipt provided.