

TOWNSHIP OF WARWICK
TENANT IDENTIFICATION Form (residential)

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. You 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 ORDINANCE 99-01 WILL RESULT IN A MINIMUM FINE OF SIX
HUNDRED DOLLARS (\$600.). (Ord. is available for inspection at the Twp. office)**

Please print

PROPERTY OWNER - (Lessor):

Name Phone #

Mailing Address: street city state zip code

TENANT (S) – (Leesee) List all adults 18 & over

Rental Property Address _____

Last Name First Name Unit # if applicable

Mailing Address (If different from above) Date 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 the same information to epfeiffer@warwick-township.org. E-mail receipt provided.