

BOROUGH OF AVONDALE RESIDENTIAL REGISTRATION APPLICATION

GENERAL OWNER/CONTACT INFORMATION			
Property Address:			
Owner Name(s):			
Owner is (check one):			
<input type="checkbox"/> Individual	<input type="checkbox"/> Corporation or LLC	<input type="checkbox"/> Partnership	<input type="checkbox"/> Other:
Owner Address:			
Mailing Address (if different than Owner Address):			
Phone Number:			
Email Address:			
Property Agent Contact Information (if applicable):			
Applicant Signature: _____			Date: _____
GENERAL PROPERTY INFORMATION			
Type of Property:			
<input type="checkbox"/> Detached single-family <input type="checkbox"/> Attached single-family <input type="checkbox"/> Condominium unit			
<input type="checkbox"/> Apartment building(s): Number of buildings _____ Number of apartment units _____			
<input type="checkbox"/> Mixed use (residential and other use) What is other use? _____			
Number of shared off-street parking spaces to be used for premises? _____			
SPECIFIC UNIT INFORMATION			
Unit number or room identification: _____ What type of unit? <input type="checkbox"/> Type 1 <input type="checkbox"/> Type 2			
Number of Occupants: _____ Is unit owner occupied*? <input type="checkbox"/> Yes <input type="checkbox"/> No			
Total number of rooms in unit: Bedrooms ____; Bathrooms ____; Living rooms ____; Cooking ____			
Number of off-street parking spaces assigned to unit: _____			

Definitions:

Type 1 Unit: A single unit providing, within a contiguous enclosed private area, complete independent living facilities, including permanent provisions for living, eating, sleeping, cooking, and sanitation, for persons living as single housekeeping unit. A unit is not a Type 1 unit if any of its living, eating, sleeping, cooking or sanitation facilities are shared with the occupants of any other unit.

Type 2 Unit: Any room or group of contiguous rooms forming a single habitable unit occupied or intended to be occupied for sleeping or living which is not a Type 1 unit.

RELATED SPACES

List areas shared with any other unit (rooms, hallways, entrances, storage areas, laundry, parking, etc.) and identify each other unit # by which each area is shared.

Area	Owner	Shared with (unit #s)
Type of Room		
Hallway		
Entrance		
Storage		
Laundry		
Parking		
Sidewalks		
Other: _____		

*OWNER / OCCUPANT INFORMATION

	NAME	PHONE NUMBER
1		
2		
3		
4		
5		
6		
7		
8		

Long term occupancy Type 1 - Identify which occupants/tenants are party to a lease or other written agreement.

Name	Contact Number	Party to Lease or Other Written Agreement?		Related to other occupant/tenant? Identify relative.
		Yes	No	