

Rental Dwelling Registry Law Filing Form

Date _____

Property Information	
Address: _____	

Number of units:	_____

Owner Information			
Name: _____		Name: _____	
Address: _____		Address: _____	
_____		_____	
Note: P.O. Boxes are not acceptable			
Telephone:			
Home: _____		Cell: _____	
Work: _____		Fax: _____	
Home: _____		Cell: _____	
Work: _____		Fax: _____	

IF THE CONTACT ADDRESS OF THE PROPERTY OWNER IS NOT WITHIN SCHENECTADY COUNTY OR WITHIN A 25 MILE RADIUS OF THE PROPERTY, YOU MUST PROVIDE THE NAME OF A MANAGER OR AGENT WHO RESIDES IN SCHENECTADY COUNTY OR WITHIN A 25 MILE RADIUS OF THE PROPERTY:

Agent /Manager Name: _____

Address: _____

Home Phone: _____ Cell: _____ Work: _____ Fax: _____