TOWN OF EAST HAVEN LANDLORD REGISTRATION

Instructions:

This form is to be completed by all nonresident owners or agents in charge of occupied or vacant rental real property located within the Town of East Haven. A nonresident owner of a property is an owner who does not currently reside at such property. If the nonresident owner is a corporation, partnership, trust or other legally recognized entity, the contact information of the agent in charge shall be provided. This form is available at the Department of Planning & Zoning and can also be downloaded from the Town of East Haven website, http://www.townofeasthavenct.org/, under Town Hall Departments -> Planning & Zoning. Please note that there is no fee to register, however, failure to comply with the address registration requirement will result is the imposition of penalties including a fine of up to \$50.00 per building for each first offense. Thereafter, the penalty shall be \$100.00 per month per unit.

	istration	- Change (of Nonresident Owner Address
owner/individ	<u>ual)</u>		
rst Name, Midd	lle Initial		
- P.O. BOX N	OT ACCEPTI	ED	
		State	Zip
Alt. Phone			
3			
- Non-Individu			Agent Name
- Non-Individu esident Princip Corporation	al Owner (not		Agent Name
esident Princip	al Owner (not □Trust □	an individual) Partnership	-
esident Princip	al Owner (not □Trust □	an individual) Partnership	-
	- P.O. BOX N		- P.O. BOX NOT ACCEPTED State Alt. Phone

Name of Nonresident Owner	
Property/Rental Address:	
Street	Unit #
Are any of the tenants of this unit physically or developmentally disabled?	□Yes □No
Property/Rental Address:	
Street	Unit #
Are any of the tenants of this unit physically or developmentally disabled?	□Yes □No
Property/Rental Address:	***
Street	Unit #
Are any of the tenants of this unit physically or developmentally disabled?	□Yes □No
Property/Rental Address:	
Street	Unit #
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Property/Rental Address:	
Street	Unit #
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Property/Rental Address:	
Street	Unit #
Are any of the tenants of this unit physically or developmentally disabled?	□Yes □No
Property/Rental Address:	ТТ'. Ш
Street	Unit #
Are any of the tenants of this unit physically or developmentally disabled?	\square Yes \square No

Please feel free to attach additional sheets as necessary.