



(THIS FORM ON LEGAL SIZE PAPER)

Residential Rental Housing Registration

City of Steubenville
Planning and Zoning Commission
115 South Third St., Ste. 108
Steubenville OH 43952
(740) 283-6000 extension 1700

Please print or type:

Owner

Fed. I.D. No. or Soc. Sec. No.

Corporate Officer

Home Telephone No.

Name of owner or corporate officer

Name on deed if different from above (individual or corporation)

Business Telephone No.

Permanent address

City

County

State/Zip Code

Mailing Address (if different)
In addition to the above,
an owner may list an agent
or operator who manages
the property for notification
purposes.

City

County

State/Zip Code

Agent/Operator

Home Telephone No.

Business Telephone No.

Home Address

City

State/Zip Code

Mailing address (if different)

City

State/Zip Code

Residential Rental Properties Owned in the City of Steubenville

Supply information for each property. When ownership is shared, list name and address of each additional owner. If owner is not responsible for maintenance or repairs, supply information for party responsible in addition to information for owner. Use another form for additional properties if necessary, when more than one building, list each building separately.

1. Street Number Street Name No. of Units

Additional owner Address/City/State/Zip

Party Responsible for maintenance repairs at above rental unit(s) if other than owner is:

Name of Party Responsible Address/City/State/Zip Code Telephone No.

2. Street Number Street Name No. of Units

Additional owner Address/City/State/Zip

Party Responsible for maintenance repairs at above rental unit(s) if other than owner is:

Name of Party Responsible Address/City/State/Zip Code Telephone No.

3. Street Number Street Name No. of Units Total Fee

Additional owner Address/City/State/Zip

Party Responsible for maintenance repairs at above rental unit(s) if other than owner is:

Name of Party Responsible Address/City/State/Zip Code Telephone No.

Signature of owner or corporate officer Date

I the above signed certify that this information is correct under penalty of law.

Space Below for City Use Only

Form Reviewed By: Date Received: _____

Signature Date Registration No. _____