

**RENTAL REGISTRATION**

Property Owner/Rental Agent: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone Number: \_\_\_\_\_ Cell Number \_\_\_\_\_

**TENANT INFORMATION:**

Full Name: \_\_\_\_\_ Social Sec. No. \_\_\_\_\_

Address: \_\_\_\_\_

Employer: \_\_\_\_\_

Address of Employer: \_\_\_\_\_

**LIST BELOW ALL OTHERS IN HOUSEHOLD OVER 16 YEARS OF AGE:**

<b>Name:</b>	<b>Soc. Sec. No.:</b>	<b>Employer:</b>
_____	_____	_____
_____	_____	_____
_____	_____	_____

Date Moved In: \_\_\_\_\_ Date Moved Out: \_\_\_\_\_

**MOON TOWNSHIP ORDINANCE REQUIRES ALL OWNERS/AGENTS OF RENTAL PROPERTY TO SUBMIT NAMES, ADDRESSES, AND SOCIAL SECURITY NUMBERS OF THEIR OCCUPANTS WITHIN 30 DAYS OF OCCUPANCY.**

**RETURN TO:  
MOON TOWNSHIP MUNICIPAL BUILDING  
MOON TOWNSHIP MANAGER  
1000 BEAVER GRADE ROAD  
MOON TOWNSHIP, PA 15108**