



# BOROUGH of SELLERSVILLE

INCORPORATED DECEMBER 7, 1874



LOCATED ON THE LIBERTY BELL TRAIL

140 East Church Street Phone (215) 257-5075  
 Fax (215) 257-6163 Sellersville, PA 18960  
 Website: <http://www.sellersvilleboro.org>

Thomas C. Hufnagle—Mayor, CBO  
 David J. Rivet—Manager/Secretary

## BOROUGH COUNCIL

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CHAIRMAN Pro Tem  
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### **Residential Rental Dwelling Registration Form**

(attach copy of lease with Registration Form)

Property Address:		Tax Map Parcel #39-	
Number of Residential Units:		Number of Buildings:	
Property Owner:			
Contact Name:		Phone No.	
Address:			
After Hours Phone No:		Cellular No:	
Fax#:		E-Mail:	
Manager:		Phone No.	
Address:			
After Hours Phone No:		Cellular No:	
Fax#:		E-Mail:	
Property Management Company:			
Contact Name:		Phone No.	
Address:			
After Hours Phone No:		Cellular No:	
Fax#:		E-Mail:	
Fire Alarm System: Yes No N/A		Type Of Alarms: Smoke Heat Duct	
Fire Alarm Company:			
Address:			
Sprinkler System: Yes No N/A		Last Inspection Date:	
Sprinkler System Company:			
Address:			
Square Footage: Length of Build _____ "X" Width of Build _____ "X" # Floors ____ = _____			
Knox Box: Yes No		Knox Box Location:	

### **LICENSE / INSPECTION FEE SCHEDULE**

Per Unit every three years	\$80.00
Re-inspection fee	\$50.00
Reinstatement fee	\$50.00

- *Tenant Information on Back of Form - Make Copies as necessary*

Unit Number:		Building Number:	
Address:			
No. of Tenants on Lease:		Contact Phone #:	
Names of Tenants over 18 Years of Age			
1.		3.	
2.		4.	
# of Minor Children:		Special Needs / Disabilities:	Yes No

Unit Number:		Building Number:	
Address:			
No. of Tenants on Lease:		Contact Phone #:	
Names of Tenants over 18 Years of Age			
1.		3.	
2.		4.	
# of Minor Children:		Special Needs/Disabilities:	Yes No

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