



# HISTORY LIVES IN DUNCANSVILLE

315 14<sup>th</sup> Street Duncansville, PA 16635 | P: 814-695-9548 | [Duncansvillepa.gov](http://Duncansvillepa.gov)

## APPLICATION FOR REGULATED RENTAL UNIT OCCUPANCY

**APPLICATION FEE: \$50.00**

ADDRESS OF UNIT TO BE LICENSED: \_\_\_\_\_

Description of Unit:

- Single – Family House       Half of Double House/Duplex       Apartment Unit  
 Dormitory       Fraternity House       Sorority House  
 Other: \_\_\_\_\_

*Please list names and contact numbers for each occupant on the reverse side.*

Is off-street parking provided for the tenants of this rental unit?     YES       NO

If yes, where is it located? \_\_\_\_\_      Number of spaces: \_\_\_\_\_

Name of Property Owner: \_\_\_\_\_

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

\_\_\_\_\_ Cell Phone: (\_\_\_\_) - \_\_\_\_ - \_\_\_\_\_

\_\_\_\_\_ Email: \_\_\_\_\_

Local Property Manager Information if applicable:

Business Name: \_\_\_\_\_ Personal contact Name: \_\_\_\_\_

Contact Number: \_\_\_\_\_ Email: \_\_\_\_\_

Please see the reverse side

**Names & Contact information for each occupant in the rental unit.**

The names and telephone numbers of all occupants, ages 18 and over, must be provided on this application. Children under the age of 18 are not required to be named but must be designated as “Child, age \_\_\_\_”. We request this information as a safety precaution. In the event of an emergency, the local Fire Department can use this information to ensure the safety of each occupant.

**NOTE: You must submit an update within 15 days of any changes in tenants.**

Occupants Name or “Child, age ____”	Contact Number:

The tenant has been provided with a copy of the checklist.

By signing this annual license application, I, the owner self-certifies that the Rental unit is to International Property Maintenance Code, as indicated, but not limited to, the self-certification check list provided at application. I have read, understand, and agree to comply with all requirements of the Duncansville Borough Residential Rental Occupancy Ordinance, fully understanding that the failure to comply may result on disciplinary action including, but not limited to revocation/denial of my annual rental unit occupancy license.

\_\_\_\_\_  
Signature of property owner

\_\_\_\_\_  
Signature of Borough Representative

\_\_\_\_\_  
Date

\_\_\_\_\_  
Date