Date:	



WEST BRANDYWINE TOWNSHIP RENTAL OCCUPANCY REPORT

Property C	owner's Name:					
Mailing Ad	ldress:					
SITUS Add	ress:					
Phone Nu	mber(s):		Home:	Cell:		
Tax Parcel	Number:					
Total Num	ber of Units:					
Type of R	ental or Leased	d Unit: (Mark	appropriate one)			
House	2 /	Apartment	Mobile Hom	e	Other	
Commerci	al Building		Industrial Buildin	g		
Rental or I	Leased Units Ado	dress:				
Tenant Information for Dwelling Units: (Mark appropriate one)						
Present		Previous				
Name:	Last, First, Middle			Phone Number		
Name:	Last, First, Middle			Phone Number		
Name:	Last, First, Middle			Phone Number		
Tenant E	mployer's Nam	e and Address	s:			
Name:	Last, First, Middle			Phone Number		
Address:						

Date Vacated: Landlord/Tenant Ordinance #94-06 Occupancy Report						
Tenant Information for Commercial, Industrial, etc.: (Mark appropriate one)						
Present	Previous					
Commerci	al Building	Industrial Building				
Name:	Last, First, Middle	Phone Number				
Name:	Last, First, Middle	Phone Number				
Name:	Last, First, Middle	Phone Number				
Tenant Employer's Name and Address:						
Name:	Last, First, Middle	Phone Number				
	Address					
Miscellan	eous Information:					
Date Vaca	red:					
Notes:						