

BOROUGH OF LANGHORNE MANOR

618 HULMEVILLE AVENUE
LANGHORNE MANOR
PENNSYLVANIA 19047-2749
215-752-5835 215-752-4675 (Fax)

APPLICATION FOR ANNUAL RENTAL UNIT LICENSE

License Issue Date:		Expiration Date:	
Property Owner:		Phone:	
Owner Address:			
Rental Unit Address:		Tax Parcel:	
Managing Agent: Managing Agent Address:		Phone:	
Number of Dwelling Units:			
TI :///		hone Number of Tenants	
Unit#:	Unit#:	Unit#	
Name:	Name:	Name:	
Address:	Address:	Address:	
Phone#:	Phone#:	Phone#:	
Unit#:	Unit#:	Unit#	
Name:	Name:	Name:	
Address:	Address:	Address:	
Phone#:			
Unit#:	Unit#:	Unit#	
Name:	Name:	Name:	
Address:	Address:	Address:	
Phone#:			
Owner Signature:	Date:	Date of Inspection:	
Managing Agent Signature:		Date of Re-inspection:	
	Date:		
		Number of Dwelling Units:	
The above application has been approved on		Amount of Fee:\$	
day of	year	Date Fee Paid:	
		Check#:	

Signature of Code Enforcement Officer