

**ATGLEN BOROUGH
120 MAIN STREET, P O Box 250
ATGLEN, PA 19310
610.593.6854**

APPLICATION FOR INSPECTION OF RENTAL PROPERTIES

Date: _____

\$100.00 per unit x __ Unit(s) = Total Due \$_____

Please make check payable to "Atglen Borough" and mail to Atglen Borough, P O Box 250, Atglen, PA 19310

Property Owner:

Property Address :

Total Number of Rental Units:

Contact Information for Owner:

Address: _____

Home Phone: _____

Work Phone: _____

Cell Phone: _____

Email: _____

Local Agent/Management Company (if applicable):

Address: _____

Phone: _____

Email: _____

I CERTIFY TO THE CORRECTNESS OF THIS INFORMATION AS SUBMITTED.

Property Owner or Designee Signature

Date

Print Name

For Office Use Only:

Date Received _____

Amount Received _____

Check No _____ Cash _____

Received by _____

Date and Time of scheduled inspection: _____