



SAEGERTOWN BOROUGH  
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**Rental Unit**  
**Tenant Information Year \_\_\_\_\_**

This form MUST be filled out **Completely** and **Legible** for EACH rental Unit and signed and dated:

Location: \_\_\_\_\_ Unit #: \_\_\_\_\_  
Owner: \_\_\_\_\_  
Manager: \_\_\_\_\_

Primary Renter Name: \_\_\_\_\_  
Mailing Address (Street): \_\_\_\_\_  
Mailing Address (PO Box): \_\_\_\_\_  
Town: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Current Phone Number: \_\_\_\_/\_\_\_\_/\_\_\_\_ **Date Moved in:** \_\_\_\_\_

**Names of all residents over 18 years old living in the unit (including the primary renter):**  
**(More than 3 days per week is considered a resident)**

Full Name	Age (if under 21)
_____	_____
_____	_____
_____	_____
_____	_____

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

**Providing false information constitutes a failed Inspection.**