City of Washington 55 West Maiden Street Washington PA 15301

City of Washington

Rental Registration 55 West Maiden Street Washington PA 15301 Phone: (724) 223-4200 Option 1 Ext6 washington.cityclerk@gmail.com

2024 / \$15.00 per unit



Account Number

Location / Unit

REGISTRATION FORM ON PAGE 2 & 3 BELOW

Due Date: November 4, 2024

NOTE:

- *****NEW***** Registration now requires a \$15.00 annual fee per unit. You may write one check for multiple properties, but all units require their own registration forms.
- Registration forms must accompany payment (made payable to City of Washington) and can be mailed to:

City of Washington Rental Registration 55 West Maiden Street Washington, PA 15301

- Registration and payment may also be completed online at <u>https://washingtonpa.us/rental-registration</u>. (Credit Card Fees applicable)
- Failure to return the completed Rental Registration Application by the due date will result in your account being in **noncompliance with Ordinance No. 1855**, resulting in penalties and inspection fees added to your account.
- A form must be completed for every rental property (including unoccupied rentals) and returned by due date. <u>A \$108.00 penalty will be accessed for each account/unit not in compliance.</u>
- To receive a date-stamped receipt be sure to include a postage paid self-addressed envelope.

Permit

FEE PER UNIT: \$15.00 DUE DATE: November 4, 2024 City of Washington Rental Registration 2024

> Location: Account Number: DATE RECEIVED:

Customer Copy

THIS FORM IS NOT PROOF OF COMPLIANCE UNLESS DATE STAMPED BY THE CI<mark>TY CLERK. COMPLET</mark>E FORM BELOW.

You must include a postage paid self-addressed return envelope to receive a date stamped receipt.

City of Washington



55 West Maiden Street, Washington PA 15301

Phone: 724-223-4200 Option 1 Ext 6- Fax: 724-223-4229

RENTAL REGISTRATION APPLICATION Complete **ONE** Application **Per Unit**

Due Date: November 4, 2024

Fee: \$15.00 per unit annually Year: 2024 Section I: Type of Registration	NAME: ACCOUNT NUMBER: SERVICE LOCATION					
□ New □ Renewal □ Update of property/owner informatio	n Unoccupied (New form must be updated once occupied.)					
Section II: Owner Information This section refers to the owner or owners who hold legal title (required)						
Owner's Name:						
Owner's Address:						
City:	State:Zipcode:					
Primary Phone #:Second	ary Phone #:					
Fax #:Email Address:						
Section III: Property Management Information Broker License	#					
Name of Management Company:						
Address:						
City:	State:Zipcode:					
Primary Phone #:Seco	ndary Phone #:					
Fax #:Email Address:						
Section IV: Rental Property Location						
Location:	UNIT #:					
Parcel Number:						



City of Washington 55 West Maiden Street, Washington PA 15301 RENTAL REGISTRATION APPLICATION Due Date: November 4, 2024

«AccountNum»

Section V: Tenant Registration *

Last Name	First Name	Initial	Phone Number

* If needed, list additional tenant registrations on back.

Section VI: Type of Rental Unit

	□ Single Family	Two-Family Dwelling	Multi Family	Hotel/Motel
Check one	Rooming House/ Boarding	Dorm Rooms	Personal Care	
Length of Lea	ase	Lease Expiration Date	Date of R	esidency

Section VII: Registration Fees

Description	Charge	Total
Annual Rental Registration Permit	\$15.00	\$15.00
Non-Compliance Penalty if not submitted by 11/4/2024 Unit Inspection fee for Non-Compliance after 11/4/2024	\$108.00 \$100.00	\$208.00

Annual fee per unit-\$15.00. Failure to complete and return the application by due date will result in a penalty of <u>\$108.00</u> and the automatic scheduling of the unit inspection for <u>\$100.00</u> being added to your account. Further violation of this ordinance will result in a fine of not less than \$300.00 but not more than \$1,000.00 per each unit-per each month that the rental unit is not registered or inspected as required by this Ordinance.

RETURN COMPLETED APPLICATION TO THE CITY OF WASHINGTON City of Washington, Rental Registration, 55 West Maiden Street, Washington PA 15301

I hereby certify that to the best of my knowledge this form is complete and correct and will conform to all City Ordinances.

Signature of Property Owner or Manager

Date

Receipts will be sent only if you send a self-addressed POSTAGE PAID envelope with your forms

This form may be duplicated if additional forms are needed