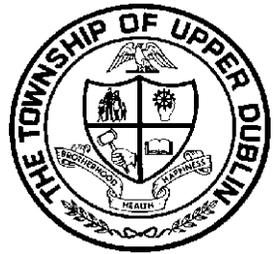


UPPER DUBLIN TOWNSHIP

801 Loch Alsh Avenue
Fort Washington, PA 19034
Phone: 215-643-1600, ext. 3928



Application for Residential Housing License

Please type or print the following information:

Rental Unit Address: _____ Number of Bldgs: _____ No. of Units: _____
Name of Owner: _____ Phone Number: _____
* Street Address _____ Emergency Number: _____
City, State, Zip: _____ Email Address: _____

* If owner does not maintain an office or reside in Upper Dublin Township, an agent must be appointed who either maintains an office or resides in Upper Dublin Township. (A tenant may serve as the agent.)

Name of Agent: _____ Phone Number: _____
Street Address: _____ Emergency Number: _____
City, State, Zip: _____ Email Address: _____

TENANT'S NAME	UNIT/APT #	PHONE NUMBER
_____	_____	() _____
_____	_____	() _____
_____	_____	() _____
_____	_____	() _____
_____	_____	() _____
_____	_____	() _____
_____	_____	() _____
_____	_____	() _____
_____	_____	() _____
_____	_____	() _____

Signature of Owner or Agent

Date

Remittance Address:
Upper Dublin Township
801 Loch Alsh Avenue, Fort Washington, PA 19034
Fax: 215-542-0797, jbertholf@upperdublin.net