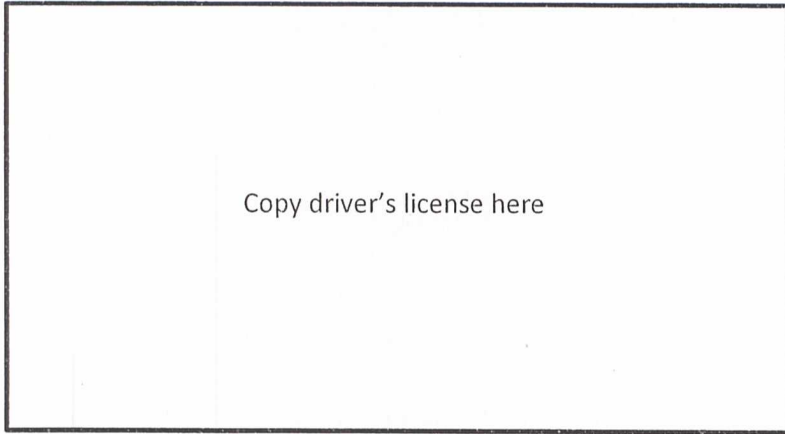


Village Of West Salem

Property Owner Registration



Driver's License # \_\_\_\_\_

Social Security# \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

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

Landowner Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone Number: (\_\_\_\_\_) \_\_\_\_\_ County: \_\_\_\_\_

Email: \_\_\_\_\_

Service Address: \_\_\_\_\_

Move in Date: \_\_\_\_\_

Will you be renting this property to tenants: (if yes, please complete the tenant portion below)

\_\_\_\_ yes    \_\_\_\_ no

Tenant Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone Number: (\_\_\_\_\_) \_\_\_\_\_

Who will be responsible for the payment of utilities?    \_\_\_\_ Landowner    \_\_\_\_ Tenant

Signature: \_\_\_\_\_