



Borough of Phoenixville  
351 Bridge Street  
Phoenixville, PA 19460  
Phone (610) 933-8801  
[www.phoenixville.org](http://www.phoenixville.org)

License #:	_____
License Fee:	_____

## Residential Rental Operating License Application

### Property Information:

Property Address: \_\_\_\_\_  
Unit #: \_\_\_\_\_ Parcel #: \_\_\_\_\_

- Single Family  
 Duplex  
 Multi Family

- Rooming House  
 Short Term Rental

*A separate application must be completed for each tax parcel number if the owner of record owns more than one property within Borough limits.*

Number of Dwelling Units: \_\_\_\_\_ Are any of the units in the structure  
Number of Rooming Units: \_\_\_\_\_ occupied by the owner?: \_\_\_\_\_ Y/N

**Definitions:** Dwelling Unit: A room or group of rooms located within a dwelling and forming a single habitable unit with facilities which are used or intended to be used for living, sleeping, cooking and eating. Rooming Unit: Any room or group of rooms forming a single habitable unit used or intended to be used for living and sleeping but not for cooking or eating purposes.

### Ownership Information:

Legal Name of Owner: \_\_\_\_\_  
Principal/Officer: \_\_\_\_\_  
Address: \_\_\_\_\_  
Primary Contact: \_\_\_\_\_  
General Phone#: \_\_\_\_\_ Cell: \_\_\_\_\_ Email: \_\_\_\_\_  
Emergency Phone#: \_\_\_\_\_ Cell: \_\_\_\_\_ Email: \_\_\_\_\_

### Party Responsible for Maintenance and Management:

Property Manager: \_\_\_\_\_  
Primary Contact: \_\_\_\_\_  
Address: \_\_\_\_\_  
General Phone#: \_\_\_\_\_ Cell: \_\_\_\_\_ Email: \_\_\_\_\_  
Emergency Phone#: \_\_\_\_\_ Cell: \_\_\_\_\_ Email: \_\_\_\_\_

If the party responsible for maintenance, management and assisting code enforcement with issues is the same as the owner, please simply write "same as above." If it is a different entity, please be advised a PO Box is not an acceptable address, and the application will be refused.

I certify that the above information is true and correct and I understand that all mailings from Phoenixville Borough departments, including the annual rental license billing statement will be mailed to the address of the owner indicated above. Any changes to the above application information shall be identified to Phoenixville Borough immediately.

Applicant's Signature: \_\_\_\_\_ Date: \_\_\_\_\_