

RP-CO 2019 APPLICATION FOR CERTIFICATE OF OCCUPANCY – SINGLE UNIT DWELLING

PRINT OR TYPE ALL FIELDS

TENANT INFORMATION

MAXIMUM (3) UNRELATED PERSONS PER UNIT.

INFORMATION IS NECESSARY FOR TAX PURPOSES.

TENANT LIST CAN BE SUBMITTED ON A SEPARATE DOCUMENT IF ADDITIONAL SPACE IS NEEDED.

NAME OF PRINCIPAL TENANT

TELEPHONE NUMBER

LEASE EXPIRATION DATE

MONTH TO MONTH

____ - ____ - ____ / ____ / ____

NAME OF TENANT (2) RELATIONSHIP TO PRINCIPAL TENANT: FAMILY FRIEND ROOMMATE

NAME OF TENANT (3) RELATIONSHIP TO PRINCIPAL TENANT: FAMILY FRIEND ROOMMATE

NAME OF TENANT (4) RELATIONSHIP TO PRINCIPAL TENANT: FAMILY FRIEND ROOMMATE

NAME OF TENANT (5) RELATIONSHIP TO PRINCIPAL TENANT: FAMILY FRIEND ROOMMATE

NAME OF TENANT (6) RELATIONSHIP TO PRINCIPAL TENANT: FAMILY FRIEND ROOMMATE

NAME OF TENANT (7) RELATIONSHIP TO PRINCIPAL TENANT: FAMILY FRIEND ROOMMATE

NAME OF TENANT (8) RELATIONSHIP TO PRINCIPAL TENANT: FAMILY FRIEND ROOMMATE

RETURN ALL MATERIALS BY JANUARY 7, 2019 TO:

CITY OF SOUTH EUCLID, HOUSING DEPARTMENT, 1349 SOUTH GREEN ROAD, SOUTH EUCLID, OHIO 44121