



City of Beacon
New York

Landlord Registration Statement

Date _____

Parcel Address _____

Tax ID Number _____

Property Use:

_____ Commercial _____ Single Family _____ Two Family

_____ Multi-Family #of Units _____ Mixed Use (please specify # of Units)
_____ # of Residential Units
_____ # of Commercial Units

Property Owners Information

Name _____

Mailing Address _____

Physical Address _____

Business Phone # _____ Home Phone # _____

Cell Phone # _____ E-mail Address _____

Signature of Owner

Fee: \$75.00

Please see reverse side

If the owner does not reside within a fifteen-mile radius of the City of Beacon the owner shall designate a managing agent who shall reside within a 15 mile radius. The managing agent shall be a natural person at least 18 years of age and who shall be responsible for and in control of the maintenance and operation of the property. The managing agent shall be designated as the person upon whom process may be served on behalf of the owner.

Managing Agent Information

Name _____

Mailing Address _____

Business Phone # _____ Home Phone # _____

Cell Phone # _____ E-mail Address _____