

City of Scott City  
Rental Housing Registration

Owner's Name: \_\_\_\_\_  
 Owner's Address: \_\_\_\_\_  
 Phone Number: \_\_\_\_\_  
 Email Address: \_\_\_\_\_  
 Business Name: \_\_\_\_\_  
 Business Address: \_\_\_\_\_

Date	Construction Type, Duplex, Single family, or Multifamily	Street Address	Renter, Tenants, & Children In Household	Years Occupied
1	Tenant: _____	Tenant: _____	Renter: _____ Tenant: _____	Tenant: _____
2	Tenant: _____	Tenant: _____	Renter: _____ Tenant: _____	Tenant: _____
3	Tenant: _____	Tenant: _____	Renter: _____ Tenant: _____	Tenant: _____
4	Tenant: _____	Tenant: _____	Renter: _____ Tenant: _____	Tenant: _____
5	Tenant: _____	Tenant: _____	Renter: _____ Tenant: _____	Tenant: _____

I, hereby attest the above to be a true and accurate record:

Owner's Signature \_\_\_\_\_

Date \_\_\_\_\_

Date	Construction Type,	Street Address	Renter, Tenants, & Children In Household	Years Occupied
6	Construction Duplex, Single Family, or Multifamily			
	Tenant:	Tenant:	Renter:	Tenant:
7				
	Tenant:	Tenant:	Renter:	Tenant:
8				
	Tenant:	Tenant:	Renter:	Tenant:
9				
	Tenant:	Tenant:	Renter:	Tenant:
10				
	Tenant:	Tenant:	Renter:	Tenant:
11				
	Tenant:	Tenant:	Renter:	Tenant:
12				
	Tenant:	Tenant:	Renter:	Tenant:
13				
	Tenant:	Tenant:	Renter:	Tenant:
14				
	Tenant:	Tenant:	Renter:	Tenant:
15				
	Tenant:	Tenant:	Renter:	Tenant: