



City of Watervliet



2 Fifteenth Street * 2nd Floor – Room 8 * Watervliet, NY 12189 * (518) 270-3800 ext. 106

Watervliet Code Enforcement Department

Rental Dwelling Registry

(Must be completed by property owner)

Date _____

Address of Rental Property _____

Parcel No. _____

Acct. No. _____

Property Information/Building Description:

Number of stories (check one): 1 2 3 4 5 Other _____

Number of residential rental units in building _____

Physical location of units in building (number per floor): Base: _____ 1st _____ 2nd _____ 3rd _____ Other _____

Individual Owner Information:

Name(s) _____

Additional Name(s) _____

Legal Address of Owner(s) _____

City, State & Zip _____

Telephone Numbers:

Home _____ Work _____ Pager _____ Cell _____

E-mail Address _____

Designation of Agent *(If the owner does not reside in Albany County or an adjacent county, a local agent must be designated that can be reached at all times).*

Name(s) _____

Address _____

City, State & Zip _____

Telephone Numbers:

Home _____ Work _____ Pager _____ Cell _____

E-mail Address _____

Owner's Signature _____ Date _____

Agent's Signature _____ Date _____