

Town of Garner Rental Registration Form

P.O. Box 446, Garner, NC 27529

Phone: 919-772-4688

Fax: 919-662-5135

Please complete applicable information below. Attach additional sheets if needed.

Property Manager: _____ Address: _____

City: _____ State: _____ Zip: _____ Tel #: _____

Contact Person: _____

Property Listings:

Rental Property Address: _____

Property Owner's Name: _____ Address: _____

City: _____ State: _____ Zip: _____ Tel #: _____

Rental Property Address: _____

Property Owner's Name: _____ Address: _____

City: _____ State: _____ Zip: _____ Tel #: _____

Rental Property Address: _____

Property Owner's Name: _____ Address: _____

City: _____ State: _____ Zip: _____ Tel #: _____

Rental Property Address: _____

Property Owner's Name: _____ Address: _____

City: _____ State: _____ Zip: _____ Tel #: _____

Rental Property Address: _____

Property Owner's Name: _____ Address: _____

City: _____ State: _____ Zip: _____ Tel #: _____

Signature

I the undersigned, do hereby certify, that the listings shown are correct, and that any changes to this list will require me to submit a new list or listing to the Town of Garner. I also understand that the failure to do so could result in additional penalties or fines.

Property Manager / Owner's Signature

Date