

Bradley D. Sellers, Mayor



Melvin Lester, Building Commissioner

Ted Sims, Chief Housing Inspector

APPLICATION FOR SCHOOL ENROLLMENT
Family Sharing Occupancy Permit Application

Address & Unit of Location to be inspected: _____ Date: _____

Type of Dwelling Single Family [] Two- Family [] Apartment [] Condominium []

Property Owner: _____ Phone No: _____

Mailing Address: _____ Alt Phone No: _____

City _____ State _____ Zip _____

SSN/Tax ID _____ Fax No. _____

Property Manager: _____ Phone No: _____

Property Address: _____ Alt Phone No: _____

City _____ State _____ Zip _____

Lease Agreement Term: _____

Head of Household: _____

Previous Address: _____

City/State / Zip: _____

Table with 4 columns: Phone Number, SSN (Tax purposes), DOB, Relationship. Includes a row of blank lines for data entry.

Phone No. _____ Alt Phone No. _____

Table with 4 columns: Occupant, SSN, DOB, Relationship. Includes multiple rows of blank lines for data entry.