

City of Port Jervis, New York



Building Department Offices
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Port Jervis NY 12771

Building Department

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CITY OF PORT JERVIS, NEW YORK BUILDING DEPARTMENT

**-OWNERS REGISTRATION FORM-
(THREE DWELLINGS OR MORE)**

MULTIPLE DWELLING STREET ADDRESS _____

BUILDING OWNER'S NAME _____

OWNER'S ADDRESS & TELEPHONE# _____

NAME OF CONTRACTED HAULER AND DAY(S) OF REMOVAL PER WEEK:

NOTE: PRIVATE HAULERS MUST BE LICENSED WITH THE CITY OF PORT JERVIS

IF APPLICABLE, CORPORATION INFORMATION:

NAME OF CORPORATION _____

ADDRESS OF CORPORATION _____

LIST CORPORATION OFFICER'S NAME, RESIDENCE ADDRESS, RESIDENCE TELEPHONE NO., BUSINESS ADDRESS, BUSINESS TELEPHONE NO. & EXTENSION (IF OTHER THAN ABOVE CORPORATION ADDRESS)

PRESIDENT _____

VICE-PRESIDENT _____

SECRETARY _____

TREASURER _____

370-3.A CODE ORDINANCE OF THE CITY OF PORT JERVIS THE NAME, RESIDENCE AND BUSINESS ADDRESSES, RESIDENCE AND BUSINESS TELEPHONE NUMBERS OF A NATURAL PERSON, TWENTY-ONE (21) YEARS OR OLDER, WHO ACTUALLY RESIDES WITHIN THE CITY OF PORT JERVIS & WHO SHALL BE DDESIGNATED BY SUCH OWNER AS A MANAGING AGENT IN CONTROL OF & RESPONSIBLE FOR THE MAINTENANCE & OPERATION OF SUCH DWELLING & WHO SHALL BE DESIGNATED AS THE PERSON UPON WHOM MAY BE SERVED ON BEHALF OF THE OWNER.

OWNER'S RESIDENT AGENT (WITHIN CITY LIMITS) _____

RESIDENT AGENT ADDRESS & TELEPHONE# _____

RESIDENT AGENT BUSINESS ADDRESS & TELEPHONE # _____

NOTE: ANY CHANGES IN OWNERSHIP OR RESIDENT MANAGING STATUS WITH REGARDS TO THIS PROPERTY MUST BE REPORTED TO THE CITY OF PORT JERVIS BUILDING DEPARTMENT AND THE POSTED FORM REVISED WITHIN TEN (10) DAYS OF SUCH CHANGE AS REQUIRED BY LAW'