ORDINANCE NO. 2008-1 SPRING BROOK TOWNSHIP

AN ORDINANCE OF SPRING BROOK TOWNSHIP, LACKAWANNA COUNTY, PENNSYLVANIA REQUIRING EVERY OWNER WHO RENTS A PARCEL OF REAL ESTATE TO PROVIDE SEMI-ANNUALLY A LIST OF NAMES AND ADDRESSES OF ALL TENANTS AND FIXING PENALTIES FOR THE VIOLATION THEREOF.

BE IT ORDAINED by Spring Brook Township, Pennsylvania, and it is hereby ordained by and with the authority of same, as follows:

WHEREAS, Spring Brook Township, by and through its Board of Supervisors, desires to ensure the fair and impartial collection of Earned Income Tax imposed by the Township, and

WHEREAS, the fair and impartial imposition of the aforesaid taxes required that the Township have available to it a list of all residents in the Township.

NOW, THEREFORE, BE IT ENACTED AND ORDAINED by the Spring Brook Township Board of Supervisors, that it is hereby enacted and ordained as follows:

SECTION 1. Every person owning any property within the Township which is rented, in whole or in part, to one or more persons for residential purposes shall certify to the Township Secretary a list of all lessees and tenants over 18 years of age and their respective addresses on or before March 31 and September 30 of each year. The forms shall be provided by the Township for the purpose of such registration.

SECTION 2. Any person owning any property within the Township which is rented to one or more persons for residential purposes who willfully or negligently fails to submit tenant lists as required by Section 1 above, shall be liable for, in addition to other penalties herein provided, such sums as would have been billed by the Township if such tenant list had been provided less any sums actually received from such tenants for the fiscal year for which the list was not provided.

SECTION 3. Any person who shall violate or fail, neglect or refuse to comply with any of the provisions of this Ordinance, shall, upon conviction of a summary offense by a District Justice be fined \$300.00 for each offense, shall be ordered to pay to the Township any losses incurred by the Township as provided in Section 2 above, together with the costs of this action, and in default of payment thereof, be committed to the County Prison for a period not exceeding thirty (30) days.

SECTION 4. Should any section or provision of this ordinance be declared to be invalid by the courts, such decision shall not affect the validity of the Ordinance as a whole, not the validity of any other section or provisions of the Ordinance than the one so declared.

SECTION 5. All other ordinances or parts of ordinances which are contrary to the provision of this Ordinance are hereby repealed to the extent necessary to give this Ordinance force full and effect.

SECTION 6. All Ordinances or parts of Ordinances that are inconsistent with this ordinance are hereby repealed.

SECTION 7. The provisions of this ordinance shall become effective on and be applicable to any document made, executed, delivered, or presented for recording on or after \$100.000..........., 2008.

SPRING BROOK TOWNSHIP

By:

SUPERVISOR

CLIDEDAICOD

SUPERVISOR

SUPPRVISOR

SUPERVISOR

ATTEST:

Secretary

SPRING BROOK TOWNSHIP 966 STATE ROUTE 307 SPRING BROOK TOWNSHIP, PA 18444

PHONE (570) 842-7028 FAX (570) 842-0633

www.springbrooktownship.org TENANT REGISTRATION FORM

Each unit must have its own individual address which shall be visibly displayed on or near the door. If you are not sure that all units have been assigned individual addresses please contact the Municipal Office at 570-842-7028. While Ordinance # 2008-1 only requires that you provide updated lists twice a year we would appreciate it if you would advise the Township Office whenever you get a new tenant.

A completed form for each rental unit is due in the Municipal Office before March 31st and September 30th of each

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Property Owner / Landlord Name:	
Physical Address of Rental Property:	
Telephone Number of Property Owner / Landlord:	
Mailing Address of Property Owner / Landlord:	
Name, Telephone Number and Mailing Address of Local Manager or Emergency Contact Person (Other Than Property Owner / Landlord):	
Total Number of Units At This Location:	
Address and/or Number of Apartment / Home (State whether upstairs or downstairs, left or right, front or back):	
Name of Lessee:	
Telephone Number of Lessee:	
Residency At This Location Started On:	
Actual Number of Occupants Per Unit:	
Names of All Occupants 18 Years of Age or Older: (Please Include Current Mailing Address for Each Occupant if Different From Above.)	
Address and/or Number of Apartment / Home (State whether upstairs or downstairs, left or right, front or back):	
Name of Lessee:	4 ¹
Telephone Number of Lessee:	
Residency At This Location Started On:	
Actual Number of Occupants Per Unit:	
Names of All Occupants 18 Years of Age or Older:	
(Please Include Current Mailing Address for Each	
Occupant if Different From Above.)	
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This form may be copied or additional forms may be obtained from the Municipal Office.