



VILLAGE OF SWANSEA

1444 Boul Avenue  
Swansea, IL 62226  
618-234-0044 – phone  
618-234-0222 – fax

APPLICATION FOR LANDLORD REGISTRATION

Name of Owner \_\_\_\_\_ Phone # \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Name of Managing Agent \_\_\_\_\_ (if none, write none)

Name of Firm of Managing Agent \_\_\_\_\_

Firm Address \_\_\_\_\_ (No P.O. Box)

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Firm Phone Number \_\_\_\_\_

Email Address \_\_\_\_\_

List All Rental Property Addresses:

Address: \_\_\_\_\_  Apartment House  
 Apartment Complex  
 Rental House

License Year: \_\_\_\_\_ 2017 \_\_\_\_\_ Fee Paid: \_\_\_\_\_ Date: \_\_\_\_\_

( Jan. 1 – Dec. 31 )