



File Number:

I, _____ of the City/Town/Municipality of _____

declare that:

To the best of my knowledge, the information in this form is complete and accurate. I understand that it is an offence under s.234 of the *Residential Tenancies Act, 2006* to file false or misleading information in this form.

Name

Signature

Date (dd/mm/yyyy)

OFFICE USE ONLY:

Delivery Method: In Person Mail Courier Email Efile Fax FL