

6450 Wiehe Road • Golf Manor, OH 45237 • 513-531-7491 • 513-531-4404 FAX • www.golfmanoroh.gov

Landlord/Tenant Information Form

The information collected on this form is required by Ordinance (Section 729.01) to be completed each by each landlord and submitted to the Village of Golf Manor Tax Commissioner twice per year no later than July 31 and December 31. All applicable fields are required including tenant Social Security Number (ORD. 2018-17) and/or Driver's License information.

OWNER INFORMATION

Name/Name of Business:									
Address:	Street		City		State Zip				
Phone Number:	Street		City		State Zip				
Email Address:									
FID or Social Security Number:									
Business Type: □ Individual Proprietorship	If a Corporation, Name of President:								
□ Partnership □ Corporation	Name of Treasurer:								
If a Partnership, names of partners and addresses:	#1:			#2:					
	Street	City Sta	ate Zip	Street	City State Zip				
Address of Rental Property:	Hamilton County Auditor Pa	ercol #e		Property Status: □ Occupied (list tenants below) □ Vacant □ Undergoing restoration to be sold					
	Transition country Addition Parcel #.				☐ Section 8 or Government subsidy ☐ Group home or support provider for the disabled				

TENANT INFORMATION

	Unit#		Unit#		Unit#		Unit#	
Name:								
Phone:								
_ ::								
Email:								
Social Security#:								
Driver's License#								
:	State Issued	License #						
Previous Municipality								
:								
Date Moved into						•		
Golf Manor:								

Submit form: By email: villageclerk@golfmanoroh.gov

By FAX: 513-531-4404

By postal mail: 6450 Wiehe Road Golf Manor, OH 45237

052921

