



**LANDLORD RENTAL AND PROPERTY OWNER
REGISTRATION
P.O. BOX 69
NIAGARA FALLS, NY 14302
TELEPHONE: (716) 286-4464**

**DO YOU, THE OWNER OR AN IMMEDIATE FAMILY
MEMBER RESIDE AT THIS PROPERTY?**

Property must be a single family home for immediate family member to qualify for waiver

YES **NO** If no, you must complete the registration form

if, YES, NO FEE IS REQUIRED, simply fill out the bottom of this form and return WITHOUT payment with proof of residency.

FOR OWNER-OCCUPIED PROPERTIES:

Check the "Yes" box above and complete and sign the form below

RETURN THE ENTIRE NOTICE WITHOUT PAYMENT TO:

City of Niagara Falls, Department of Code Enforcement, P.O. Box 69, Niagara Falls, NY 14302

For the owner occupancy exemption YOU MUST provide proof of residency:

Examples of accepted documents are: (COPIES ONLY)

- Valid NYS driver's license, learners permit or Non-drivers ID.
- Bank statement showing your name and mailing address only. (Please delete or obscure any financial data).

By signature and submission of this form, the owner of the aforementioned address in the City of Niagara Falls, NY attests that all information provided is true and correct. The owner further understands that any change in status of their ownership or that of the property itself requires notification of such to the office of Landlord Licensing and Registration.

Required Owner Information.

Name of Occupant: _____

Owners Address: _____

Owners Phone No. _____

Signature of Owner _____ Date _____