## Residential Rental Property Registration Form

## Parcel ID <u>0300049124</u>001

If the property contains more than one street address, enter both the first and last number.

If it involves 20 units or more, please only give the main address.

Street Number

2029 through\_\_\_\_

| Street Direction            | EASTLAUN   |
|-----------------------------|--|
| Street Name                 | EASTLAWN   |
| Street Suffix               |  |
| Apartment / Suite Number    | n with the same and the same an |
| # of living units on parcel | matter shall be under the second of the seco |
|                             | Owner Information  |
| If owned by a busin         | ess or owner does not reside in Ohio, picase provide contact name & information  |
| Owner / Contact Name        | Donald Novosielski   |
| Business Name               |  |
| Title                       | Ou) ner Owner, Manager, General Partner, Trustee, etc  |
| Contact Address 1           | 224 Zurnace St.  |
| Contact Address 2           |  |
| City                        | Elyria   |
| State: Ohio                 | Yes  |
| Zip Code + 4                | 44035  |
| Phone Number                | (440) 326 00 96 ext  |
| Authorized Signature        | Donald Involved Date 3.05.08   |
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