

LOBAIN

Residential Rental Property Registration Form

Parcel ID

211000000003

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 45941 through _____

Street Direction _____

Street Name STATE ROUTE 162

Street Suffix _____

Apartment / Suite Number _____

of living units on parcel _____

Owner Information

If owned by a business or owner does not reside in Ohio, please provide contact name & information

Owner / Contact Name JOHN T MURPHY

Business Name _____

Title _____ Owner, Manager, General Partner, Trustee, etc

Contact Address 1 45941 STATE ROUTE 162

Contact Address 2 _____

City WELLINGTON

State: Ohio Yes

Zip Code + 4 44090

Phone Number (440) 225-6585 ext _____

Authorized Signature John T. Murphy Date 11-14-07