



Columbia Township JEDZ Property Owner Questionnaire - Tenant Report

5903 Hawthorne Avenue Cincinnati OH 45227

513-272-9954



www.columbiatwp.org

www.fairfaxohio.com

Property Owner Name: _____ SS# or FEIN: _____

Local Address: _____ City: _____ State: _____ Zip Code: _____

Corporate Address: _____ City: _____ State: _____ Zip Code: _____

Contact Person: _____ Phone number: () _____ - _____ Email: _____

Notify this office of any change in tenancy within ten days of the change. If tenant is moving out, provide a forwarding address. If you have any questions we can be reached at 5

Tenant Name: _____ Address: _____ Phone Number() _____ - _____

City: _____ State: _____ Zip Code: _____ Email: _____ Move out/Move in date: / /

Tenant Name: _____ Address: _____ Phone Number() _____ - _____

City: _____ State: _____ Zip Code: _____ Email: _____ Move out/Move in date: / /

Tenant Name: _____ Address: _____ Phone Number() _____ - _____

City: _____ State: _____ Zip Code: _____ Email: _____ Move out/Move in date: / /

Tenant Name: _____ Address: _____ Phone Number() _____ - _____

City: _____ State: _____ Zip Code: _____ Email: _____ Move out/Move in date: / /

Tenant Name: _____ Address: _____ Phone Number() _____ - _____

City: _____ State: _____ Zip Code: _____ Email: _____ Move out/Move in date: / /

Tenant Name: _____ Address: _____ Phone Number() _____ - _____

City: _____ State: _____ Zip Code: _____ Email: _____ Move out/Move in date: / /

I do hereby certify that to the best of my knowledge the above information is true, correct and complete.

Name (Print): _____ Title: _____

Signature: _____ Date: _____ - _____ - _____



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513-272-9954

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