



**INCORPORATED VILLAGE OF NORTH HAVEN**  
**Building & Zoning Department**  
335 Ferry Road, Sag Harbor, New York 11963  
PHONE: (631) 725-1378 FAX: (631) 725-1120

**LEASE REGISTRATION/CHANGE OF TENANT FORM**

Property Owner: \_\_\_\_\_ Phone: \_\_\_\_\_ Rental Permit Number: \_\_\_\_\_

Rental Property Address: \_\_\_\_\_

Tax Map Number: \_\_\_\_\_

**Tenant Information:**

Term of Lease: Beginning Date: \_\_\_\_\_ Ending Date: \_\_\_\_\_

Primary Tenant Cell Phone: \_\_\_\_\_ Alternate Phone: \_\_\_\_\_

Primary Tenant Email: \_\_\_\_\_

**LIST OF ALL TENANTS (include all adults & children occupying the dwelling, even if not listed on the Lease):**

Name: \_\_\_\_\_ Age: \_\_\_\_\_ License Plate No. \_\_\_\_\_

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**A COPY OF YOUR FULLY EXECUTED LEASE MUST BE ATTACHED.**

