



# Borough of Camp Hill

2145 Walnut Street  
Camp Hill, PA 17011  
Phone (717) 737-3456  
Fax (717) 730-3961

## ATTENTION RENTAL PROPERTY OWNERS

April 26, 2019

Dear Rental Property Owners;

***This letter is directed to owners of RESIDENTIAL rental properties. If you are a renter, please forward this letter to your property owner.***

***IF THIS IS NOT A RESIDENTIAL RENTAL PROPERTY, PLEASE DISCARD THIS LETTER.***

In order to protect and promote public health and safety within the Borough of Camp Hill, the Council of the Borough has enacted an ordinance for the registration of residential rental properties. This requires residential rental property owners to register the number of units, the number of tenants, and the contact information for owners, managers, and/or a responsible party and tenants. This ordinance also requires a responsible party be located within 35 miles of the borough. ***This is NOT an inspection program.*** The registry will assist our emergency services to plan their responses. The safety and welfare of rental community is the borough's concern.

Safety of borough residents is a high priority, so there are significant penalties for violations. Any owner or manager/responsible party for a property required to register and doesn't, may be fined no less than \$250 and no more than \$1000 plus the cost of prosecution. Each day is a separate violation and can be prosecuted as such.

On the other side of this letter is a registration form, which is reproducible for additional properties. Please return by May 30<sup>th</sup> with full payment. For questions, please email [bkozicki@camphillborough.com](mailto:bkozicki@camphillborough.com)

Thank you!

Sincerely,

Chris Miller, BCO, CFI, ASC  
Codes Enforcement Officer/Fire Marshal

**CAMP HILL BOROUGH  
RENTAL REGISTRATION FORM**  
2145 Walnut Street Camp Hill, PA 17011  
717-737-3456

Cost: \$25.00 per unit up to 3 units – unit 4 and more \$20.00 per unit

**Property Owner**

Name:

Address

Email

Fax Number

Cellphone Number

Office Number

**Responsible Party**

Name:

Address

Email

Fax Number

Cellphone Number

Office Number

**Primary Tenant**

Name:

Address

City and State

Zip Code

Email

Fax Number

Cellphone Number

Office Number

Number of Occupants per Unit:

**Current Tenant Name(s)**

1.

4.

2.

5.

3.

6.

Owner's Signature: \_\_\_\_\_ Date: \_\_\_\_\_