

## Village of Ossining 16 Croton Avenue Ossining, NY 10562

Tel. (914) 941-3554 Fax (914) 941-5940 www.villageofossining.org

## Village of Ossining Landlord Tenant Relations Council Intake Form

This intake form is for persons seeking landlord/tenant assistance related to rental properties located within the Village of Ossining. Please submit this form in person to the Village offices located at 16 Croton Ave, 2<sup>nd</sup> floor or via email: <u>LTRC@villageofossining.org</u>.

## Person seeking assistance

Date:	I am the $\square$ Tenant	Landlord Other*: *(please specify your relation to request (attorney, power of attorney, neighbor)
Address of Concern:		
Name of Tenant of Record:		
First and Last Name:		
Mailing Address:		
Email:		
<b>Contact Phone:</b>		<b>Is it OK to leave a message?</b> □ Yes □ No
Do you have a written	lease? 🗆 Yes	$\square$ No (If so, please provide a copy of the same with this application).
Landlord information		
Name of Landlord:		
Landlord's address or contact information:		
Telephone: Landlord's Mailing ac	ldress:	Email:
What is the specific matter to be addressed by the Council? (*Please write legibly)		

Please provide any supporting documentation (e.g. lease, rent demand, repair demand, etc.)

What dates and times did you request the Landlord or Tenant to correct the problem addressed above?