CITY OF TUSCALOOSA RENTAL PROPERTY DETAIL

FILING PERIOD	
QUARTERLY	ANNUAL
Q/YEAR	YEAR

Account ID: _____

RENTAL LANDLORD/OWNER: _____

CONTACT PERSON: _____

CONTACT PHONE: _____

			RESIDENTIAL ONLY	GROSS RECEIPTS FOR PERIOD ABOVE		AMOUNT DUE	
PROPERTY TYPE (COMMERCIAL OR RESIDENTIAL)	DESCRIPTION OR NAME OF PROPERTY (HOUSE/APT. COMPLEX NAME)	PHYSICAL ADDRESS OF PROPERTY (STREET, CITY, STATE, ZIP)	# OF UNITS	CITY LIMITS	POLICE JURISDICTION	1% CITY LIMITS	1/2 OF 1% POLICE JURISD.
						$ 0.00	$ 0.00
						$ 0.00	$ 0.00
						$ 0.00	$ 0.00
						$ 0.00	$ 0.00
						$ 0.00	$ 0.00
						$ 0.00	$ 0.00
						$ 0.00	$ 0.00
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						$ 0.00	$ 0.00
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