

HARRISON CENTRAL SCHOOL DISTRICT
Harrison, New York 10528
(914) 835-3300

LANDLORD/OWNER INFORMATION/AFFIDAVIT FORM

(To Be Completed and Signed by Landlord/Owner in absence of a Signed Lease)

Landlord/Owner Information *(please print):*

Name: _____

Address: _____

Telephone: _____

Date:

To: Harrison Central School District
50 Union Avenue
Harrison, New York 10528

In compliance with the request of the Harrison Central School District to validate the residency of an incoming student, I am completing this affidavit, in the absence of a signed lease, as landlord/owner of the property located at:

Street Address/Apartment # *City* *State* *Zip Code*

I have rented this location to: _____
Name of Parent(s)/Guardian(s)

Please list names of **each** person residing at this location including children: _____

In the event the parties have entered into a written lease, a copy of same is attached.

I understand that in the event this family relocates and is no longer living at the above-mentioned location I should notify the Harrison Central School District immediately of said move. I further understand that the statements made herein are required to be sworn to under oath. Any violation of that oath may be subject to penalties as prescribed by law and that the Harrison Central School District will rely upon the contents of this affidavit as factual and true as completed.

Signed/Date

Sworn to before me this

_____ day of _____, 20 ____

Notary Public