

## **Bay Shore Union Free School District** Steven J. Maloney, Ed. D. - Superintendent of Schools

OFFICE OF STUDENT SERVICES / CENTRAL REGISTRATION

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The state of the s		
ROBERT A. TORRES Director of Student Services		
and Central Registration	•	
LANDLO	ORD AFFIDAVIT	
OWNER of Premises Information: PLEASE PRINT	RENTER'S Information: PLEASE PRINT	
Name of Owner	Name of Family	<del></del>
Street Address	Street Address	····
City State Zip	City State 77	<u>·</u>

## **BUILDING INFORMATION**

City

Telephone No.

State

Zip

Zip

- reast specify sie type of national in which the impriment it incured	P	lease spectfy	the type of building	g in which the apartment is located
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( ) Single Family House ( ) Two Family House ( ) Multi-Dwelling ( ) Other: (Specify)

LEASING INFORMATION

Telephone No.