



## Longview Police Department Landlord Registration

Property owner or manager \_\_\_\_\_

Specific contact person \_\_\_\_\_

Mailing address \_\_\_\_\_

Phone number \_\_\_\_\_

Email address \_\_\_\_\_

DATE THIS INFORMATION WAS SUBMITTED TO LPD \_\_\_\_\_

	RENTAL UNIT ADDRESS	DESCRIPTION house, apartment, duplex, etc.
01		
02		
03		
04		
05		
06		
07		
08		
09		
10		

Please mail, email, fax this form to:

Longview Police Department

Landlord Registration

216 30<sup>th</sup> Avenue

Longview, WA 98632

Email: [community.policing@ci.longview.wa.us](mailto:community.policing@ci.longview.wa.us)

Fax: 360-442-5952

Or drop off the form at the Longview Police Satellite Office located at 216 30<sup>th</sup> Avenue, Longview, WA (Tuesdays-Thursdays)