



# STRATFORD PUBLIC SCHOOLS DECLARATION OF LEGAL RESIDENCE

<b>TENANT INFORMATION</b>			
<b>TENANT:</b>	_____		
	Tenant's Name		
<b>RENTAL PROPERTY:</b>	_____		
	Street Address	Zip Code	Apartment #
<b>TERM OF LEASE:</b>	_ / _ /	to	_ / _ /
	Start of lease		End of lease
	( )		_____
	Tenant's Phone Number		

<b>PROPERTY OWNER / LANDLORD INFORMATION</b>			
<b>PROPERTY OWNER:</b>	_____		
	Name of Property Owner / Landlord (please print)		
	_____		
	Property Owner / Landlord's Signature		
<b>MAILING ADDRESS:</b>	_____		
	Property Owner / Landlord's Mailing Address	City/State	Zip Code
<b>CONTACT NUMBER:</b>	( ) _____		
	Property Owner / Landlord's Phone Number		

I am making the above statement as a true and bonafide representation. I fully understand that if I make a statement that is false and which is intended to mislead a public servant in the performance of his/her official function, I will be in **VIOLATION** of Section 53a-157b of the Connecticut General Statutes, regarding making a fraudulent statement, which is a Class A misdemeanor and is punishable by a fine, not to exceed \$1,000 and/or up to one year of incarceration.

I further understand that I may be required to **UPDATE** this information at any time and **AGREE** to do so upon request from the Stratford Board of Education.

I hereby state that the individuals listed below are my tenants at the rental property listed: **(list all occupants of the household):**

Adult #1	Child #2
Adult #2	Child #3
Child #1	Child #4

\*\*\*\*\*

## NOTARIZED SECTION

On this date       /      /       \_\_\_\_\_, appeared before me  
Date Name of Property Owner / Landlord

personally known to be the individual described in, and who executed this foregoing document, and he/she duly acknowledged to me under oath to the truth of his/her statement, before me.

\_\_\_\_\_  
Signature of Notary Public

**SEAL**

\_\_\_\_\_  
Commission Expiration Date