

**Village of McCullom Lake**  
4811 W. Orchard Drive  
McCullom Lake, Illinois 60050  
Phone: 815-385-2211 Fax: 815-385-2199  
Village President – Marilyn Shepit  
[mccullomlake@comcast.net](mailto:mccullomlake@comcast.net)  
VOML.ORG

## **Landlord Reporting Form**

(Please complete the following fields or insert N/A)

Date: \_\_\_\_\_ Account # \_\_\_\_\_

Landlord Name: \_\_\_\_\_ Phone#: \_\_\_\_\_

Address of Rental Property: \_\_\_\_\_ Email: \_\_\_\_\_

Name(s) of **ALL** Occupants:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

# of Adults: \_\_\_\_\_ # of Children under 18: \_\_\_\_\_ Total # of Occupants: \_\_\_\_\_

# of Vehicles \_\_\_\_\_ Lic. Plate # \_\_\_\_\_ Lic. Plate # \_\_\_\_\_

Lic. Plate # \_\_\_\_\_ Lic. Plate# \_\_\_\_\_

Telephone #(s) of Renter: \_\_\_\_\_

Email Address of Renter: \_\_\_\_\_

Lease Date: From: \_\_\_\_\_ To: \_\_\_\_\_

I understand and agree to report any changes within the allotted amount of time specified by the Village. I understand that failure to report will result in penalties.

I, \_\_\_\_\_, affirm that the above information is true and correct to the  
(print your name)  
best of my knowledge, and that I have read the attached information.

Sign \_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/\_\_\_\_

- Please return this completed form to the McCullom Lake Village Office

- Attach a copy of the lease/rental agreement (please black out rental amount and/or security deposit)

**- LANDLORDS WHO FAIL TO REPORT TENANCY OF THEIR PROPERTY WITHIN THE FIRST QUARTER OF EACH CALANDER YEAR OR WITHIN 14 DAYS OF A CHANGE IN TENANTS SHALL BE FINED NOT LESS THAN \$500.00**

_____ Smoke Detector	Date: _____
_____ CO 2 Detector	Signed: _____