



LANDLORD REGISTRATION STATEMENT

One and two Family Residence

Pursuant to the terms of N.J.S.A.46:8-27, et seq., the following information is being supplied to the tenant. A copy of this information is also on file with the Building Department of the Borough.

BLOCK _____ LOT _____ ZONE _____

PROPERTY LOCATION: _____

NAME OF PROPERTY OWNER: _____

ADDRESS OF OWNER: _____

PHONE NUMBER: _____

NUMBER OF UNITS OWNED: _____

NUMBER OF UNITS RENTED OR LEASED: _____

DESCRIPTION OF FACILITIES AND UTILITIES: _____

NAME & ADDRESS OF MANAGING AGENT OF THE PREMISES: _____

NAME, ADDRESS & PHONE # OF PERSON PROVIDING MAINTENANCE: _____

NAME, ADDRESS & PHONE # OF PERSON TO BE CONTACTED IN EMERGENCY: _____

NAME & ADDRESS OF FUEL OIL SERVICE: _____

OWNERS SIGNATURE: _____ DATE: _____

RECEIVED BY: _____ TITLE: _____ DATE: _____