## <u>Landlord Identity Registration Statement</u> One and Two-Unit Dwelling Registration From N.J.A.C. 5:29-1.2 Thru 5:29-2.2

| Block _           | Lot  |
|-------------------|--|
| Buildin<br>Addres |  |
|                   | Y  |
|                   | Pursuant to N.J.S.A. 46:8-27 thru 37   |
| registra          | 2 One and Two-Unit Dwelling Registration Form — The form of the certificate of ation to be filed with the Housing Office and distributed to tenants by owners of non-occupied one-and-two unit dwellings shall be substantially as follows:  |
|                   | e names and addresses of all record owners of the building or of the rental business cluding all general partners in case of a partnership) are as follows:  |
|                   |  |
|                   |  |
|                   | ne record owner is a corporation, the names and addresses of the registered agent and the corporate officers are as follows:   |
|                   |  |
|                   | Record owner is not a corporation (place an "x")   |
| loc:<br>acc       | ne address of any record owner is not located in the county in which the dwelling is ated, the name and address of a person who resides in the county and is authorized to ept notices from a tenant, to issue receipts for those notices and to accept service of cess on behalf of the out-of-county record owner(s) are as follows: |
|                   |  |
|                   | The addresses of all record owners in the county in which the dwelling is located:   |
|                   |  |

| 4. The name and addi   | lress of the managing agent is as follows:   |                                  |
|--|--|----------------------------------|
|  |  |                                  |
|  |  |                                  |
| There is NO mana   | aging agent  |                                  |
|  | ress (including the dwelling unit or apartment) of the supering of the superin |                                  |
|  |  |                                  |
|  |  |                                  |
| There is no super regular maintena                                   | rintendent, janitor, custodian or other person employed to ance service  | provide                          |
| owner or managing a<br>emergency affecting<br>essential service or s | and telephone number of an individual representative of the agent who may be reached or contacted at any time in the easthe dwelling unit, including such emergencies as the failure system, and who has the authority to make emergency decisions, including the making of repairs and expenditures, is as  | event of an<br>e of any<br>sions |
|  |  |                                  |
|  |  |                                  |
| 7. The name and addre  | ess of all holders of recorded mortgages on the property are   | e as follows:                    |
|  |  |                                  |
|  |  |                                  |
|  |  |                                  |

| Dealer Na   | ame:  |                                       |             |
|---|---|---------------------------------------|-------------|
|   |   |                                       |             |
| Dealer A  | uuress  |                                       | <del></del> |
|   | The building is not h The building is heate the landlord does no                                    | d by fuel oil, but                    |             |
| D   | ate   | Landlord or Authorized Repr           | resentative |
|   |   |                                       |             |
|   | ly handed to Tenant(s) Acknowledged:  | on<br>Date                            |             |
| Receipt A   |   |                                       |             |
| Receipt A Tenant—   | Acknowledged:   | Date                                  |             |
| Receipt A Tenant— Tenant—   | Acknowledged:<br>-Signature   | Print Print                           |             |
| Receipt A Tenant— Tenant—  SEND CO Alloway P O Box 4 49 S. Gre          | Acknowledged: -Signature -Signature -MPLETED FORM TO N  | Print Print IUNICIPAL CLERK AT:       |             |
| Receipt A Tenant— Tenant—  SEND CO Alloway P O Box 4 49 S. Gre          | Acknowledged: -Signature -Signature -MPLETED FORM TO No. Township Municipal Co. 425                 | Print Print IUNICIPAL CLERK AT:       |             |
| Receipt A Tenant— Tenant—  SEND CO Alloway P O Box 4 49 S. Gre Alloway, | Acknowledged: Signature Signature MPLETED FORM TO N Township Municipal C 425 enwich Street NJ 08001 | Print Print  IUNICIPAL CLERK AT: lerk |             |

8. If fuel oil is used to heat the building and the landlord furnishes the heat, the name and