

LANDLORD REGISTRATION STATEMENT
(Required by N.J.S. 46:8-28)
In compliance with the provisions of N.J.S. 46:8-28, the
undersigned landlord of the premises known as:

**THIS FORM MUST BE COMPLETED IN ITS ENTIRETY OTHERWISE IT WILL BE DEEMED
INCOMPLETE**

Block: _____ Lot: _____

Location/address of rental property _____

Number of Units _____

**Please Note For Dwellings With More Than Two Rental Units Landlords Must Go To The BUREAU OF HOUSING INSPECTION in the Department of Community Affairs. DCA Will Then Forward A Copy Of Your Filed Statement To The Office Of The Municipal Clerk For Public Records Of The Municipality.*

Type of Rental: Apt. Commercial Condominium House Mobile Home Mult. Dwelling

Hereby makes the following statements for filing with the
Municipal Clerk of Middle Township:

A. Name, address, and phone number of **owner(s) of premises:**

Owner #1 Name: _____ Phone No.: _____

Address: _____

Owner #2 (If Applicable) Name: _____ Phone No.: _____

Address: _____

B. If a **Corporation**, the name, address, and phone number of a registered agent and corporate officers of said corporation:

Name: _____ Phone No.: _____

Address: _____

C. If the record owner(s) **is/are not located in Cape May County**, list the name, address, and phone number of the agent authorized to accept notice from a tenant and to issue receipts therefore, and to accept service of process on behalf of the record owner(s), is:

Name: _____ Phone No.: _____

Address: _____

D. The name, address, and phone number of the **managing agent**, if any of the premises:

Name: _____ Phone No.: _____

Address: _____

E. The name, address, and phone number of a **janitor, custodian, or other person, if any employed by the record owner or managing agent to provide regular maintenance service is:**

Name: _____ Phone No.: _____

Address: _____

F. The name, address, and phone number of the individual who may be contacted, and is authorized to act, in the event of an **emergency**, is:

Name: _____ Phone No.: _____

Address: _____

G. The name, and address of every **holder of a recorded mortgage** on the premises is:

H. If fuel oil is used to heat the building and the landlord furnishes the heat in the building, the name and address of the fuel oil dealer servicing the building and the grade of fuel oil used:

Company Name: _____ Phone No.: _____

Address: _____

DO NOT WRITE BELOW THIS LINE

Date Filed: _____

Received By: _____
Township Official

Registration No.: _____

Date License Issued: _____