



**BOROUGH OF BROOKLAWN**

**LANDLORD IDENTITY STATEMENT**

DATE: \_\_\_\_\_

BUILDING ADDRESS: \_\_\_\_\_

**TENANT DWELLING REGISTRATION FORM**

THE FORM OF THE CERTIFICATION OF REGISTRATION TO BE FILED WITH THE OFFICE OF CODE ENFORCEMENT AND DISTRIBUTED TO TENANTS BY OWNERS OF OCCUPIED RENTAL DWELLINGS SHALL BE SUBSTANTIALLY AS FOLLOWS:

Please type or print all information:

1. The name and addresses of all record owners of the building or of the rental business (including all general partners in the case of a partnership) are as follows (name, address, and phone number):

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

2. If the record owner is a corporation, the names and addresses of the registered agent and of the corporate officers are as follows (name, address and phone number):

\_\_\_\_\_

Record owner is not a corporation

3. If the address of any record owner is not located in the County in which the dwelling is located, the name and address of a person who resides in the county and is authorized to accept notices from a tenant to issue receipts for those notices and to accept service of process on behalf of the out of county record owner(s) are as follows (name, address and phone number):

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

4. The managing agent is as follows (name, address and phone number):

\_\_\_\_\_

There is no managing agent

5. A superintendent, janitor, custodian or other person employed to provide regular maintenance services are as follows (name, address, including apartment number, dwelling unit, etc., and phone number):

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

6. The individual representative of the record owner or managing agent who may be reached at any time in the event of any emergency affecting the dwelling or any dwelling unit, including such emergencies as the failure of any essential service of system and who has authority to make decisions concerning the building, including the making of repairs and expenditures, are as follows (name, address and phone number):

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

7. The name and address of the holders of recorded mortgages on the property are as follows:

\_\_\_\_\_

There is no recorded mortgage on the property

8. If fuel oil is used to heat the building and the owner furnishes the heat, the name and address of the fuel oil dealer servicing the building and the grade of fuel oil used are as follows (name, address and phone number):

\_\_\_\_\_

9. Number of dwelling units: \_\_\_\_\_

10. Name, phone and unit numbers of all tenants, including children:

\_\_\_\_\_

\_\_\_\_\_

(Use separate piece of paper if necessary.)

11. Name, breed and license number of any pet residing at the property

\_\_\_\_\_

12. A floor plan of the building must be submitted. The floor plan should indicate all rooms, doors, kitchens, sleeping areas, etc.

Floor plan attached

13. The owner of the property is a senior citizen and qualifies under NJ State Statue 54:4-8.41

Yes     No

14. Drivers License Number for the registering owner: \_\_\_\_\_ State: \_\_\_\_\_

Signature \_\_\_\_\_

Printed Name \_\_\_\_\_

Title \_\_\_\_\_

Date \_\_\_\_\_

*A separate form must be completed and a \$200.00 fee paid for each rental unit. Make checks payable to the Borough of Brooklawn. If the forms are not received by the due date, a \$20.00 late fee will be assessed. If you have any questions concerning this form, please call the Office of Code Enforcement at 856-456-0750 Ext. #102..*

Do not write below this line

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Check # \_\_\_\_\_ Amount \_\_\_\_\_ Date Received \_\_\_\_\_

Tax Record Checked  Yes    Initials: \_\_\_\_\_