

YEAR: 20



**DEPTFORD TOWNSHIP  
HOUSING INSPECTION OFFICE  
1011 COOPER ST., DEPTFORD, NJ 08096  
PHONE: (856) 686-2216 FAX: (856) 848-8227**

**LANDLORD REGISTRATION APPLICATION**

**SECTION A: GENERAL** (Multi-family Complexes only need to complete general section once, but must complete Section B for each unit.) Number of units in building: \_\_\_\_\_

1. **Rental Property Address:** \_\_\_\_\_  
Street Address, City, State, ZIP Code

2. **Owner Information:** In cases of partnership or corporation, list information on all names of general partners, corporate offices and registered agent.

Name \_\_\_\_\_  
Address \_\_\_\_\_  
Phone \_\_\_\_\_  
Fax \_\_\_\_\_

Record Owner is a Corporation  Yes  No      Record Owner is a Partnership  Yes  No

Registered Agent: \_\_\_\_\_  
Name Street Address, City, State, ZIP Code

Phone \_\_\_\_\_ Fax \_\_\_\_\_ Emergency Phone \_\_\_\_\_

3. **Manager/Local Contact Information:** If owner is not a resident of Gloucester County, NJ, please provide authorized individual information for acceptance on notices from tenant, to issue receipts; therefore, and accept/contract service of process on behalf of the record owner:

\_\_\_\_\_ Name Street Address, City, State, ZIP Code

\_\_\_\_\_ Phone Fax Emergency/Night Phone

4. **Superintendent/Janitor/Custodian or other Individual** to provide repetitive maintenance:

\_\_\_\_\_ Name Street Address, City, State, ZIP Code

\_\_\_\_\_ Phone Fax Emergency/Night Phone

5. **Owner's Emergency Representative** – In absence of owner/agent in time of emergency who is authorized to make emergency decisions regarding this rental unit.

\_\_\_\_\_ Name Street Address, City, State, ZIP Code

\_\_\_\_\_ Phone Fax Emergency/Night Phone

6. **Mortgage Holder Info** – List all holders of recorded mortgages on this rental property

Name \_\_\_\_\_  
Address \_\_\_\_\_

Block \_\_\_\_\_ Lot \_\_\_\_\_

**LANDLORD REGISTRATION APPLICATION**  
continued

**SECTION B: UNIT INFORMATION:** Unit No. \_\_\_\_\_

7. **Number of sleeping rooms in this unit:** \_\_\_\_\_ **Additional requirement note:** A floor plan shall be attached to this form. Plan need not be to scale.

8. **Names of ALL current occupants of this unit:** \_\_\_\_\_  
\_\_\_\_\_

9. **Unit utilities information as provided by lease agreement:** Select Yes **OR** No

Owner: Heat  Yes  No    Electric  Yes  No    Water  Yes  No    Sewer  Yes  No  
Yard Maintenance  Yes  No

Tenant: Heat  Yes  No    Electric  Yes  No    Water  Yes  No    Sewer  Yes  No  
Yard Maintenance  Yes  No

Fuel Dealer's Name (if applicable): \_\_\_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_ Grade \_\_\_\_\_

10. **NON-Rental Unit Certification:** I certify this is not a Resident Rental Unit. \_\_\_\_\_ ← (initial)

11. **Date of Last CO Inspection:** Month \_\_\_\_\_ Day \_\_\_\_\_ Year \_\_\_\_\_

12. **Owner/Agent Certification:** I hereby certify that all the above information is true to the best of my knowledge and belief. I am aware that if the foregoing information is willfully false, that I am subject to penalties and criminal prosecution.

Date: \_\_\_\_\_ Owner/Agent Signature(s): \_\_\_\_\_

Date: \_\_\_\_\_ Owner/Agent Signature(s): \_\_\_\_\_

Date: \_\_\_\_\_ Owner/Agent Signature(s): \_\_\_\_\_

**\*\*\*NOTE\*\*\*** Every property owner is required to submit a license application. Pursuant to the application, an amended registration form must be filed within twenty (20) days. Any change in the information is required to be included therein. No additional fee shall be required for the filing of an amended registration form. A new license application must be completed when a property is sold. All Municipal Assessments must be satisfied or a license will not be issued and will be considered incomplete and not in compliance with Deptford Township Ordinance No. O.16.12.

FOR OFFICIAL USE ONLY: Date Applied \_\_\_\_\_ Fee: \$ \_\_\_\_\_  Cash  Check # \_\_\_\_\_

Taxes Due  Yes  No    Utility Due  Yes  No    Assessments Satisfied  Yes  No

**MAXIMUM NUMBER OF OCCUPANTS ALLOWED FOR UNIT:** \_\_\_\_\_

Block \_\_\_\_\_ & Lot \_\_\_\_\_