

Landlord Rental Property Registration Application



Borough of Highlands
42 Shore Drive
Highlands, N.J. 07732
732-872-1224 Ext. 215
Fax - 732-872-0670

FEES

Year 1 \$250.00 + \$75.00 per rental unit
Year 2 \$50.00 per rental unit
Year 3 \$25.00 per rental unit
Year 4 \$25.00 per rental unit
Do not combine this fee with other borough fees.
Please pay with separate check or cash.

- Required Per Ordinance 03-15 for registration of a building used for rental.
- INCOMPLETE, ILLEGIBLE APPLICATIONS WILL NOT BE ACCEPTED PLEASE PRINT
- THIS FORM IS REQUIRED TO BE COMPLETED ONCE A YEAR

Application Date: _____

PROPERTY INFORMATION

Block: _____ Lot: _____ Property Address: _____
Total number of rental units on property: _____ No. Of bedrooms: _____
Have there been any summons against this property in the past year? (circle) Yes No

OWNERS INFORMATION

Name: _____
Address: _____
Phone Number: _____ Cell Phone: _____

EMERGENCY CONTACT

Must be a Resident of Monmouth County, who can receive Notices from Tenants & Borough
Name: _____
Address: _____
Phone Number: _____ Cell Phone: _____

MANAGING AGENT INFORMATION

Name: _____
Address: _____
Phone Number: _____ Cell Phone: _____

HEATING

Is Fuel Oil used for heating? Yes No Grade of Fuel: _____
If Yes – Name of Fuel Oil Provider: _____
Address: _____
Phone Number: _____ Location of tank: _____

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MORTGAGE HOLDER INFORMATION

Name: _____
Address: _____
Contact Person: _____ Phone Number: _____

FLOOR PLAN

Has a Floor Plan been submitted to and approved by the Borough of Highlands Code Enforcement Officer? (circle) Yes No

TENANT INFORMATION FOR EACH UNIT

Unit: _____ (If more than one unit please provide the Tenant Information on a copy of this form, to be attached.)

NAMES:	AGE:	GENDER:
1. _____	_____	_____
2. _____ <input type="checkbox"/> <input type="checkbox"/>	_____	_____
3. _____	_____	_____
4. _____	_____	_____
5. _____	_____	_____
6. _____	_____	_____

I certify that the above information is true and that all rental units have an active certificate of occupancy.

Owner: _____ Date: _____

FOR OFFICE USE ONLY

Registration Fee Amount: \$ _____ Registration No. _____
Cash _____ Check No. _____ Registration Year: _____
Copy Provided to Code Enforcement Officer: _____ State No. _____
Page 3 Provided to Clerk: _____ Date: _____

LANDLORD REGISTRATION CERTIFICATE

Pursuant to N.J.S.A. 46:8-26 et seq.

Borough of Highlands, County of Monmouth, State of New Jersey

Pursuant to the New Jersey Landlord Act, N.J.S.A. 46:8-26 et seq., I hereby file the following "Registration Statement of Landlord" with your office for the property located at _____, in the Borough of Highlands, County of Monmouth.

1. Name and address of property owner:

2. Name and address of owner of rental business:

3. If the owner is a corporation:
 - a. Name and address of registered agent of the corporation:

 - b. Name and address of officers of corporation:

4. Name of Person located in the county in which the property is located who is authorized by the owners of the property to accept and sign a receipt for notices from tenants and to issue receipt therefore and to accept process of such:

5. Name and address of managing agent (if any):

6. Name and address (including apartment number) of maintenance employee (if any):

7. Name, address, and telephone number of an individual representative of the owner or managing agent who may be contacted in the event of an emergency having the authority to make emergency decisions, who will be available 24 hours per day:

8. Name and address of all holders of recorded mortgages:

9. Name and address of fuel oil dealer servicing and the fuel oil grade, if applicable:

LANDLORD'S SIGNATURE

MUNICIPAL CLERK'S SIGNATURE

LANDLORD'S NAME PRINTED

MUNICIPAL CLERK'S NAME PRINTED

DATE

DATE