

TOWN OF HAMMONTON

100 Central Ave

Hammonton, N.J. 08037

Rental Registration and Inspection Office

609.567.4300 EXT: 109

mrogers@townofhammonton.org

609.567.4300 EXT: 168

fsacco@townofhammonton.org

Landlord Registration Form

(satisfies N.J.S.A. 46:8-27 through 37)

* Indicates required fields

*1. Name, address of all registered owners of the rental property(IF A CORP. INCLUDE NAMES OF ALL OFFICERS.)

*2. Address, Block and Lot number of the proposed rental property

Block:

Lot:

Number of Units at this location: _____

*3. E-mail address for property owner and tenant(s)

4. If fuel oil is used as a source of heat, furnish the name and address of supplier

*5. Number of dwelling units at this location _____

Fee schedule: 1-7 units \$150.00 per unit

8-25 units \$125.00 per unit

>25 units \$100.00 per unit

\$50.00 late fee assessed 30 days after due date

Make checks payable to Town of Hammonton Rental Registration Office

*6. Attach a floor plan of the building. Plan should include all rooms, door, kitchen(s) and sleeping areas. Plan must also provide room dimensions.

7. If the owner of the property is a senior citizen who resides in a unit of the property and who otherwise qualifies under the disability and income provisions of NJSA54:4-8.41 the license fee shall be waived.

8. Please indicate whether you meet these criteria

Yes _____ No _____

*

9. Names of all persons occupying dwelling:

1) _____

2) _____

3) _____

4) _____

5) _____

*** Provide true copy of current lease. (Due annually with registration fee)**

*

10. Attach a floor plan of the dwelling listing all rooms and their dimensions.

I certify that the information contained herein is true and accurate

Signature of Landlord

Print Name.:
