

BOROUGH OF METUCHEN

500 Main Street Metuchen, New Jersey 08840

Landlord Registration Form

N.J.S.A. 46:8-26 ET SEQ

1. Address of Premises: _____
Street Number and Name of Street

Number of Units at this address: _____

Municipality: Metuchen **State:** New Jersey **County:** Middlesex

2. Property Owner(s) General Information & Mailing Address

A. Name and Address of Property Owner

If Private / Individual: _____
Last Name, First Name Middle Initial

If Other: _____
Give Full Legal Name of Ownership, Including Corporation, Incorporated, Partnership, T/A etc...

Address: _____
Post Office Box Number or Street Number and Name

City: _____ **State:** _____ **Zip Code:** _____

Telephone Number: _____ Is This A Cell Phone: Yes No

Email Address: _____

B. Name and Address of Registered Agent if Owner is a Corporation

Name: _____
Last Name, First Name Middle Initial

Address: _____
Street Number and Name of Street

City: _____ **State:** _____ **Zip Code:** _____

Telephone Number: _____ Is This A Cell Phone: Yes No

Email Address: _____

C. Name and Address of Person within Middlesex County upon whom Service of Process may be made: (Address Must Not Be A Post Office Box)

Name: _____
Last Name, First Name Middle Initial

Address: _____
Street Number and Name of Street

City: _____ **State:** _____ **Zip Code:** _____

Telephone Number: _____ Is This A Cell Phone: Yes No

SAME AS OWNER

D. Name and Address of Manager of the Premises, if any

Name: _____
Last Name, First Name Middle Initial

Address: _____
Street Number and Name of Street

City: _____ **State:** _____ **Zip Code:** _____

Telephone Number: _____ Is This A Cell Phone: Yes No
SAME AS OWNER TENANT IS RESPONSIBLE

E. Name and Address of Maintenance Personnel of the Premises, if any

Name: _____
Last Name, First Name Middle Initial

Address: _____
Street Number and Name of Street

City: _____ **State:** _____ **Zip Code:** _____

Telephone Number: _____ Is This A Cell Phone: Yes No
SAME AS OWNER TENANT IS RESPONSIBLE

**F. Name and Address of Person who should be contact in the event of an Emergency at the Premises
(failure of essential services, decisions on emergency repairs)**

Name: _____
Last Name, First Name Middle Initial

Address: _____
Street Number and Name of Street

City: _____ **State:** _____ **Zip Code:** _____

Telephone Number: _____ Is This A Cell Phone: Yes No
SAME AS OWNER

G. Name and Address of Mortgage Holders on Premises

Name: _____
Last Name, First Name Middle Initial

Address: _____
Street Number and Name of Street

City: _____ **State:** _____ **Zip Code:** _____

Telephone Number: _____ Is This A Cell Phone: Yes No

For Division Use Only

Inspector Name: _____ **Certification Number:** _____

Registration Number: _____ **Date:** _____ 20____

Address: _____
Street Number and name of Street

Number of Units at this address: _____

Block Number

Lot Number

Municipal Tax Account Number

- (0) Corporation (1) Private / Individual (2) Partnership (3) Condominium
(4) Cooperative (5) Government Agency (6) LLC Corporation

This information shall be filed with the Municipal Clerk of the Borough of Metuchen where the property is located, provided to each tenant, and Posted in a conspicuous place on the premises.

Changes in above information shall be provided for the above within seven (7) days of a change.

Date Prepared: _____ 20 _____

Owner's Signature : _____

One (1) & Two (2) family rental and multi-family residential	\$ 75.00
Duplex (non-owner occupied) Two Family	\$125.00
Three (3) Family – Five (5) Family (per dwelling unit)	\$ 50.00
Apartment Complexes (6-10 units)	\$250.00
Apartment Complexes (11-24 units)	\$350.00
Apartment Complexes (25-50 units)	\$500.00
Apartment Complexes (51-74 units)	\$650.00
Apartment Complexes (75-124 units)	\$800.00
Apartment Complexes (125-199 units)	\$950.00
Apartment Complexes (200-249 units)	\$1,200.00
Apartment Complexes (250-299 units)	\$1,500.00

Registration Fees are Payable to: **Borough of Metuchen**

This form and all registration fees should be mailed to:

Metuchen Fire Prevention Bureau
500 Main Street
Metuchen, NJ 08840

or

They may be dropped off at the Finance Department at Borough Hall during regular business hours.

I do hereby certify that the foregoing statements made by me are true. I am aware that if any of the foregoing statement made by me are willfully false, I will be subject to penalty.

Sworn and subscribed to before me this _____ day of _____, 20 _____

Signature of Notary Public

Applicant's Signature

Printed Name of Applicant