

Borough of Jamesburg  
Rental Unit – Registration Form

A separate registration form must be completed for each unit, even where there is more than (1) one rental unit contained within the same building

1. Name of record owner: \_\_\_\_\_

2. Address of record owner: \_\_\_\_\_  
\_\_\_\_\_

Telephone No. Day (\_\_\_\_) \_\_\_\_\_ Evening (\_\_\_\_) \_\_\_\_\_

Email address: \_\_\_\_\_

3. Address of rental unit: \_\_\_\_\_

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

\*\* In the case of a partnership, the names and addresses of all general partners shall be provided, together with the telephone numbers for each of such individuals indicating where such individual may be reached both during the day and evening hours. If the record owner is a corporation, the names & addresses of the registered agent and corporate officers of said corporation together with the telephone numbers for each of such individuals may be reached both during the day and evening hours shall be provided.

4. If record owner (see No. 3) above is not located in Middlesex County, provide the name and address of a person **who resides in Middlesex County** who is authorized to act on behalf of the record owner:

Name \_\_\_\_\_

Address: \_\_\_\_\_

Telephone No: Day (\_\_\_\_) \_\_\_\_\_ Night (\_\_\_\_) \_\_\_\_\_

Email address: \_\_\_\_\_

5. Name of agent of rental unit, if applicable: \_\_\_\_\_

Address of agent, if applicable: \_\_\_\_\_  
\_\_\_\_\_

Telephone No: Day (\_\_\_\_) \_\_\_\_\_ Night (\_\_\_\_) \_\_\_\_\_

Email address: \_\_\_\_\_

6. Name of superintendent, janitor, custodian of other individual employed by owner or agent to provide regular maintenance service, if applicable:

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

Telephone No: Day \_\_\_\_\_ Night \_\_\_\_\_

(OVER)

7. In case of an emergency, contact person is: \_\_\_\_\_

Telephone No: Day \_\_\_\_\_ Night \_\_\_\_\_

Email address: \_\_\_\_\_

8. Name of the holders(s) of a recorded mortgage(s) on the rental unit:

Name: \_\_\_\_\_

Mortgage holders address: \_\_\_\_\_

\_\_\_\_\_ Attach additional sheet if needed.

9. If fuel oil is used to heat the rental unit (Provided by landlord), Name of fuel oil dealer/gas servicing unit:

\_\_\_\_\_ Address: \_\_\_\_\_ Telephone \_\_\_\_\_

No. ( ) \_\_\_\_\_ Grade of fuel oil used: \_\_\_\_\_

10. Square footage of the entire unit: \_\_\_\_\_ Floor Plan must be included with this form

Square footage of bedrooms:

#1 \_\_\_\_\_ #2 \_\_\_\_\_ #3 \_\_\_\_\_ #4 \_\_\_\_\_ Living room \_\_\_\_\_

Dining Room \_\_\_\_\_ or combined Lr/Dr \_\_\_\_\_

Tenant identification is NOT MANDATORY for issuance of a license. If provided, owner acknowledges that such information has been provided voluntarily. When owner fails to provide such information, the owner may be deemed to be in possession for purposes of all enforcement and penalty provisions.

11. Names of tenants: 1. \_\_\_\_\_, 2. \_\_\_\_\_

3. \_\_\_\_\_, 4. \_\_\_\_\_, 5. \_\_\_\_\_

12. Commencement of tenancy \_\_\_\_\_ Termination of tenancy \_\_\_\_\_

13. Information regarding person filing this form: Name \_\_\_\_\_

Address: \_\_\_\_\_ Telephone: ( ) \_\_\_\_\_

I hereby certify that the above information is true and correct:

Signature \_\_\_\_\_ Print name \_\_\_\_\_

Title \_\_\_\_\_ Date: \_\_\_\_\_

Received by: \_\_\_\_\_ Date \_\_\_\_\_