



LANDLORD REGISTRATION FORM

Clerk's Office
200 South Street
Morristown, NJ 07960
973-292-6636

Street Address: _____

Block: _____ Lot: _____ No. of units _____

Pursuant to the *New Jersey Landlord Act N.J.S.A. 46:8-28 et.seq.* this form must be completed and filed with the Municipal Clerk for each rental housing property and a copy provided to each tenant. Any change to the information listed must be forwarded to the Municipal Clerk within 30 days.

Name and address of the record owner or the Registered Agent if owned by a corporation:

Name: _____ Phone: _____

Address: _____

Name and address of a person who resides in the county in which the premises are located and is authorized to accept notices and to issue a receipt and accept service on behalf of the record owner:

Name: _____ Phone: _____

Address: _____

Name and address of the Managing Agent of the premises:

Name: _____ Phone: _____

Address: _____

Name and address of the person responsible to provide regular maintenance service:

Name: _____ Phone: _____

Address: _____

Name and address of the person who is available 24 hours a day to respond in the event of an emergency:

Name: _____ Phone: _____

Address: _____

Name and address of the holder of the recorded mortgage on the premises:

Name: _____ Phone: _____

Address: _____

If fuel oil is supplied to heat the building, the company name and address of the fuel oil dealer:

Name: _____ Phone: _____

Address: _____

Form completed by: _____ Date: _____