



LANDLORD REGISTRATION FORM

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 of the change.

Please include payment in the amount of \$25.00 made payable to the Township of Maple Shade.

Rental Property Address:

Address:

Name and address of the rental owner or rental business:

Name:	Phone:
Address:	

If the address of any record owner is not located in the county in which the dwelling is located, list the name and address of a person who resides in the county and is authorized to accept notices, issue receipts, and accept service on behalf of the out-of-county record owner:

Name:	Phone:
Address:	

Name and address of the Managing Agent:

Name:	Phone:
Address:	

Name and address of the superintendent, janitor, custodian, or other person employed 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 property:

Name:	Phone:
Address:	

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

Name:	Phone:
Address:	

Form completed by:

Name:	Phone:
Email Address:	
Date completed:	