



LANDLORD REGISTRATION FORM

Street Address:	_____	Cherry Hill, NJ
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:
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