

Borough of Clementon 101 Gibbsboro Road Clementon, NJ 08021 Housing Inspector 856-783-0284 ext. 127

Rental Property Reminders

- 1. Rental registrations and fees required annually. They are due in January, and a \$20 surcharge will be added for each additional month turned in late.
- 2. All municipal taxes, water/sewer charges, other municipal assessments must be current when the rental registration application is turned in.
- 3. Registration application forms must be complete with all questions answered, fees paid, floor plan attached, sleeping room list and tenant list attached.
- 4. A copy of the annual rental registration must be provided to your tenants.
- 5. Rental properties must have an approved certificate of occupancy inspection prior to becoming occupied.
- 6. Every change of occupant requires a certificate of occupancy inspection.
- 7. Only occupants whose names are listed on the attached tenant list are permitted to live in rental unit.
- 8. Periodic interior and exterior inspections will be done on all rental properties to ensure health, safety and welfare of occupants and general public.
- 9. Owners or occupants shall give the inspecting officer free access to the rental unit at all reasonable times.
- 10. Owners and occupants will be notified of any violations found and given adequate time to comply.
- 11. Activities/actions/events/conduct occurring in/on the premises of a rental property, from a tenant/animal/guest; the landlord/owner is responsible/liable.
- 12. It is advised that landlords/owners inspect the inside and outside of their rental properties regularly to ensure everything is in compliance.
- 13. It is advised that landlords/owners become familiar with the New Jersey State Housing Code 5:28 and any other N.J. statutes pertaining to rental properties.
- 14. It is advised that landlords/owners become familiar with the Borough of Clementon's ordinances found within the following chapters:
 - o Ch. 34 Housing Authority.
 - o Ch. 91 Unsafe Buildings.
 - o Ch. 96 Certificates of occupancy for rental properties.
 - o Ch. 155 Housing Standards.
 - o Ch. 2 I 4 Property Maintenance.
 - Ch. 220 Rental Properties



Landlord Identity Registration Statement

(N.J.S.A. 46:3 - 28)

Γhe f	following information	shall be submitted	for all tenant-	occupied prope	erties in the B	orough of	Clementon
or y	ear						

Signature	
Please print	
	-

Please complete and return to:

Borough of Clementon, Code Enforcement Office, 101Gibbsboro Road, Clementon, NJ 08021

This form may be photocopied for additional properties



Block

Lot

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Landlord Registration Application

YEAR: 20 ___ __

Section A: General (Multi-family complexes only need to complete general section once, but must complete section B for each unit.) Number of units in building: _____ 1. Rental Property Address Street address, city, State, Zip Code 2. Owner Information: In cases of partnership or corporation, list information on all names of general partners, corporate offices, and registered agent. Name **Address** Phone **Email Record Owner is a Corporation:** ☐ Yes ☐ No **Record Owner is a Partnership:** ☐ Yes ☐ No **Registered Agent** Name Street Address, City, State, ZIP Code Phone Fax **Emergency Phone** 3. Manager/Local Contact Information: If owner is not a resident of Clementon, NJ, please provide authorized individual information for acceptance on notices from tenant, to issue receipts; therefore, and accept/contract service of process on behalf of the record owner: Street Address, City, State, ZIP Code Name **Emergency Phone** Fax 4. Superintendent/Janitor/Custodian or other Individual to provide repetitive maintenance: Name Street Address, City, State, ZIP Code Fax Emergency Phone 5. Owner's Emergency Representative - In absence of owner/agent in time of an emergency, who is authorized to make emergency decisions regarding this rental unit? Name Street Address, City, State, ZIP Code Phone Fax Emergency Phone 6. Mortgage Holder Info - List all holders of recorded mortgages on this rental property Name Address



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Landlord Registration Application, continued

Section	B: Unit	: Information: Unit No _									
7.	7. Number of sleeping rooms in this unit:					Additional requirement note: A floor plan shall be attached to this form. Plan need not be to scale.					
8.	Names	of ALL current occupan	ts of this u	nit:							
9. Unit utilities information as provided by lease agreement: Select Yes OR No											
		Heat	Electric		W	Water		Sewer	Yard Maintenance		
Owne	r:	☐ Yes ☐ No	☐ Yes ☐	No	☐ Yes	□ No		Yes 🗌 No	☐ Yes	□ No	
Tenan	t:	☐ Yes ☐ No	☐ Yes ☐	□ No	☐ Yes	☐ Yes ☐ No ☐ Yes ☐ No		Yes 🗆 No	☐ Yes ☐ No		
Fuel D	ealer's	Name (if applicable):									
Addre	ss:										
Phone	: :							Grade			
10). Date	of Last CO Inspection:	Month:		Day	Υ	ear				
11. Owner/Agent Certification			I hereby certify that all the above information is true to the best of my knowledge and belief. I am aware that if the foregoing information is willfully false, that I am subject to penalties and criminal prosecution.								
12	2.										
Date:			Owner/Agent Signat		gnature(s):						
Date:			Owner/Ag	gent Sig	gnature(s):						
Date:			Owner/Agent Signature(s):								
require shall be propert	d to be requir y is sol	ery property owner is r filed pursuant to this art ed for the filing of an ar d. Failure to comply wi ntitled, "Rental Propertie	icle within (mended reg th the abo	(20) tw gistration ve will	enty days a on form. A render this	fter any cl new licer application	nange ise ap on in	e in the information in the info	ation. No t be com	o additional fee opleted when a	
		FOR OFFICIAL USE ONLY								ı	
		Date Applied:		F	ee	☐ Ca	sh 🗆	Check#		1	
		Taxes Due	Yes	No						1	
		Utility Due	Yes	No						1	
		Assessments Satisfied	Yes	No						1	
		Maximum number of o	occupants a	llowed	for unit					1	

Block



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