

**REGISTRATION STATEMENT OF LANDLORD
PURSUANT TO N.J.S.A. 46:8-27 ET SEQ.**

**BOROUGH OF HAMPTON, COUNTY OF HUNTERDON
STATE OF NEW JERSEY**

To: Municipal Clerk of Hampton Borough
1 Wells Ave.
P.O. Box 418
Hampton, NJ 08827

The landlord registration requirement applies to all rental premises or units used for dwelling purposes except owner-occupied premises with not more than two rental units.

Pursuant to the *New Jersey Landlord Act, N.J.S.A. 46:8-27 et seq.*, I hereby file the following "Registration Statement of Landlord" with your office for the property located at _____, in the Borough of Hampton, County of Hunterdon:

1. Name and address of owner of property (N.J.S.A. 46:8-28):

2. Name and address of owner of rental business (N.J.S.A. 46:8-28a):

3. If record owner of property is a corporation (N.J.S.A. 46:8-28b):

A. Name and address of registered agent of the corporation:

B. Name and address of Officers of Corporation:

4. Name of person located in the county in which the property is located who is authorized by the owner of the property to accept and sign a receipt for notices from tenants and to issue receipts therefore, and to accept service of process (N.J.S.A. 46:8-28c):

5. Name and address of managing agent (if any) (N.J.S.A. 46:8-28d):

6. Name and address (including apartment number) of maintenance employee (if any) (N.J.S.A. 46:8-28e):

7. Name, address and telephone number of an individual representative of the owner or managing agent who may be contacted in the event of an emergency having authority to make emergency decisions, who is available 24 hrs. per day (N.J.S.A. 46:8-28f):

8. Name and address of all holders of recorded mortgages (N.J.S.A. 46:8-28f):

9. Name and address of fuel oil dealer servicing building and fuel oil grade, if applicable (N.J.S.A. 46:8-28):

10. Name and address where tenants may obtain crime insurance applications through the Federal Crime Insurance Program, Title VI of the Housing and Urban Development Act of 1970, if a multiple dwelling (N.J.S.A. 46:8-39):

By: _____

Date: _____

Signature

Print or Type Name