



LANDLORD REGISTRATION FORM

Execution of this form does not grant authority to occupy the premises. Pursuant to Section 261-55.1 of the Code of the Borough of Rockaway, the premises must be inspected for a CERTIFICATE OF HABITABILITY prior to occupancy.

Premises Covered by Registration

Property Address: _____ Block: _____ Lot: _____

No. of Units: _____ No. of Bedrooms in Each Unit: _____ Year Built: _____

Owner Information

Owner: _____

Mailing Address: _____

Telephone Number: _____ Email Address: _____

Name and Address of Person in County Authorized to Accept Notices from Tenant

Company Name: _____

Representative: _____

Mailing Address: _____

Telephone Number: _____ Cell Phone Number: _____

Email Address: _____

Managing Agent (if applicable)

Company Name: _____
Representative: _____
Mailing Address: _____
Telephone Number: _____ Cell Phone Number: _____
Email Address: _____

Person Responsible for Maintenance

Company Name: _____
Representative: _____
Mailing Address: _____
Telephone Number: _____ Cell Phone Number: _____
Email Address: _____

Emergency Contact

Company Name: _____
Representative: _____
Mailing Address: _____
Telephone Number: _____ Cell Phone Number: _____
Email Address: _____

Water/Sewer Utility Information

Check All that Apply: City Water Well* Septic System City Sewer

If served by well, is the premises in compliance with the Private Well Testing Act (N.J.S.A. 58:12A-26, et seq.)?
