

Borough of Somerville  
One & Two Family Non Owner Occupied  
Residential Rental Property Registration

Please complete, sign and return this form to the Department of Community Development.

Pursuant to N.J.S.A. 46:8-26 et. seq., the Landlord Registration requirement applies to all rental premises except owner occupied premises with not more than two rental units. Registration must be made within 30 days of transfer of ownership or creation of new apartments. In addition Chapter 132 of the Code of the Borough of Somerville requires registration and inspection of non owner occupied one and two family dwellings, the owner is responsible to file the registration and schedule the inspection. A fee of \$100 for a single family and \$125 for a two family dwelling will be assessed to you in June of every year.

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**Property Information:**

Block: \_\_\_\_\_ Lot: \_\_\_\_\_ Property Address: \_\_\_\_\_

**Check One:**

Single family      Number of bedrooms \_\_\_\_\_

Two family      Unit # \_\_\_\_ Number of bedrooms \_\_\_\_\_ Unit # \_\_\_\_ Number of bedrooms \_\_\_\_\_

Owner's Name: \_\_\_\_\_ Telephone Number: \_\_\_\_\_

Owner's Address: \_\_\_\_\_

Does the property use fuel oil to heat the building and does the landlord furnish heat?

Yes  No    If Yes complete the following:

Name & Address of heating oil supplier: \_\_\_\_\_ Grade of fuel oil: \_\_\_\_\_

**Please provide the Name and Address of the following:**

Registered agent and corporate officers of the corporation:

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Superintendent employed to provide regular maintenance that may be reached in the event of an emergency and has the authority to make emergency decisions:

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Every holder of a recorded mortgage on the premises:

Managing agent of the premises:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Owner's Certification**

*I/We the undersigned do hereby certify that the information provided above is true and accurate and that any false or misleading information can be grounds for prosecution. I understand that inclusion in this program does not validate that the two family status has been authorized by the Borough for zoning purposes.*

Owner: \_\_\_\_\_ Date: \_\_\_\_\_

**MUST BE AN ORIGINAL SIGNATURE, NOT A PHOTOCOPY OR FACSIMILE**

**FOR OFFICE USE ONLY:**

Date Rec'd: \_\_\_\_\_ Check #: \_\_\_\_\_  Cash Fee  \$100  \$125

Inspection Date & Time \_\_\_\_\_ Inspector: \_\_\_\_\_

Payment is for year \_\_\_\_\_.  Please add to the program for future years.

C: Clerk-Administrator  
CFO