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Marc Lazarow, Councilman
Clarissa Nolde, Councilwoman
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THE NEW JERSEY LANDLORD REGISTRATION ACT

By law, every landlord of a dwelling, **except owner-occupied** premises with **not more than two (2) rental units**, must file with the clerk of the municipality in which the residential property is situated, or with the Bureau of Housing Inspection in the Department of Community Affairs, a certificate of registration (*N.J.S.A. 46:8-28*).

If your building **contains three (3) or more apartments**, the landlord must register with:

**New Jersey Department of Community Affairs Bureau of
Housing Inspection
PO Box 810
Trenton, New Jersey 08625-0810
(609)633-6225**

The Department of Community Affairs will forward a copy of the filed statement to the Municipal Clerk for the public records of the municipality.

In addition to the filing of the registration statement, landlords are required to provide each tenant with a copy of the registration certificate (*N.J.S.A. 46:8-28-29*). The landlord should have the tenant sign and date a copy "received" when the tenant moves in and the record should be made a permanent part of the tenant's file.





Borough Clerks Office, 403 South Avenue, Garwood, NJ 07027

clerk@garwood.org

LANDLORD REGISTRATION FORM

Street Address:	Block:	Lot:	No. of units/apts.:
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The name and address of the **record owner(s)**. If such owners are a partnership, the name of all general partners. If such owners are a corporation, the name and address of the registered agent and corporate officers:

Name:	Phone:
Address:	

If the address of any record owner is not located in the county in which the premises is located, the name and address of a person who resides in the county in which the premises are located and is authorized to accept notices from a tenant and to issue receipt therefore and to accept service of process on behalf of the record owner:

The name and address of the **managing agent** of the premises:

Name:	Phone:
Address:	

The name and addresses, including the dwelling unit, apartment or room number of the **superintendent, janitor, custodian** or other individual employed by the record owner to provide regular maintenance service:

Name:	Phone:
Address:	

The name, address and telephone number of an individual representative of the record owner or managing agent who may be reached or contacted at any time in the event of an **emergency**:

Name:	Phone:
Address:	

The name and address of every **holder of a recorded mortgage** on the premises:

If fuel oil is used to heat the building and the landlord furnishes the heat in the building, the name and address of the fuel oil dealer servicing the building, and the grade of fuel oil used.

Name:	Address:
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Signature of Owner: _____

Date: _____

Received by: _____



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OWNER-OCCUPANCY AFFIDAVIT

(Landlord Identity Law – N.J.S.A. 46:8-27 through 46:8-37)

***IMPORTANT* THIS FORM SHALL ONLY BE COMPLETED BY THE PREMISE OWNER OR ONE OF THE PREMISE OWNERS**

1. PREMISE OWNER(S) NAME(S)

2. PREMISE LOCATION

Street Address	Unit#	Phone
Union	Borough of Garwood	
County	Municipality	
Block	Lot	Qualifier

Mailing Address (if different than Premise Location)

With respect to the premises listed above, please complete section 3 for Owner Occupied two family units or section 4 for Non-Owner Occupied two family units and all other residential rental properties.

3. OWNER OCCUPIED TWO FAMILY

_____ I am (the/one of the) owner(s) of record of the premise listed
(initial) above that is a two family building (two-dwelling units) and (I/at least one owner listed above) reside(s) in one or more of the dwelling units located on the premise.

If you selected this option, please initial one (1) of the following statements.

_____ The premise owners reside in both dwelling units located
(initial) on the premise.

-OR-

_____ The premise owners reside in one of the dwelling units on
(initial) the premise and the other dwelling unit is rented by a tenant or offered for rent.

If you selected this option, skip number 4 (Non-Owner Occupied) and proceed to number 5 (Certification). Return this affidavit to the Borough Clerk's Office.

4. NON-OWNER OCCUPIED TWO FAMILY AND ALL OTHER RESIDENTIAL RENTAL PROPERTY REGARDLESS OF THE NUMBER OF UNITS

_____ I am (the owner/one of the owners) of record of the premise listed
(initial) above which is a residential rental property that is not an owner occupied one or two family.

If you selected this option, please complete the attached Landlord Registration Form and return the completed form with this affidavit to the Borough Clerk's Office.

5. CERTIFICATION

By signing, I understand that my statements constitute representation as to your occupancy regarding the above referenced property. I certify the above declarations are true to the best of my knowledge and belief; and understand my declarations will be considered as if made under oath and subject to penalties for perjury if falsified.

Signature of Premise Owner Completing Form Date

Printed Name of Premise Owner Completing Form Date