New Jersey Department of Community Affairs
Division of Codes and Standards
Landlord-Tenant Information Service

REGULATIONS FOR THE LANDLORD IDENTITY REGISTRATION FORM

N.J.A.C. 5:29-1.1

Printed by State of NJ June 2011 (Updated in-house October 25, 2022)

5:29-1.1 Applicability

(a) Pursuant to N.J.S.A. 46:8-28 and 46:8-29, the form prescribed by this subchapter is required to be given by landlords to tenants **in single unit dwellings and in two-unit dwellings that are not owner-occupied and to be filed in the office of the clerk of the municipality in which any such single unit dwelling or two-unit dwelling is situated.**

Pursuant to N.J. Senate Bill S-1368 signed into law in 2022, all owners of rental units are to maintain current liability insurance and must register ANNUALLY a copy of their current liability insurance with the Municipal Clerk's office. Therefore, you MUST include a copy of your current liability insurance certificate with this application. If a copy of your current liability insurance is not received, your Landlord Registration will be rejected which can affect your ability to receive a Certificate of Occupancy from our Building Department.

(b) Tenants in multiple dwellings are required to be given a copy of the certificate of registration filed with the Bureau of Housing Inspection in accordance with N.J.S.A. 55:13A-12, N.J.S.A. 46:8-28 and N.J.A.C. 5:10-1.11. (Contact the Bureau of Housing Inspection, P.O. Box 810, Trenton, New Jersey 08625 (609) 633-6240 for registration applications for buildings with three or more dwelling units)

THE ATTACHED FORM IS TO BE FILED WITH THE MUNICIPAL CLERK ALONG WITH A COPY OF YOUR CURRENT LIABILITY INSURANCE CERTIFICATE AND DISTRIBUTED TO TENANTS IN SINGLE UNIT DWELLINGS AND IN TWO UNIT DWELLINGS THAT ARE NOT OWNER-OCCUPIED. (DO NOT SEND THIS STATEMENT TO LANDLORD-TENANT INFORMATION SERVICE)

Similar forms may be obtained from private sources. You may obtain a copy of the form by faxing your request to (609) 292-2839 or by writing to:

New Jersey Department of Community Affairs
Division of Codes and Standards
Bureau of Homeowner Protection
Landlord-Tenant Information Service
P.O. Box 805
Trenton, New Jersey 08625-0805

LANDLORD IDENTITY REGISTRATION STATEMENT
ONE AND TWO-UNIT DWELLING REGISTRATION FORM

This non-owner occupied certificate of Registration for one or two unit dwellings is to be filed in the Municipal Clerk's Office along with a copy of your ***CURRENT LIABILITY INSURANCE CERTIFICATE*** and distributed to the tenants by owner. DO NOT LEAVE ANY SECTION BLANK. DO NOT WRITE "SEE ABOVE" – YOU MUST FILL OUT COMPLETELY.

(1). Property address:

_____

(2) Name, address & phone number of all record owners:

Name _____

Street _____

City & State _____

Phone Number _____

Mandatory Email:_____

(3) If the record owner is a corporation, names and address of the registered agent and corporate officers:

Corporation Name _____

Officer/Agent Name _____

Street _____

City & State _____

Mandatory Email:_____

☐ Record owner is not a corporation

(4) Name, address and phone number of a person who is authorized to accept notices from a tenant and to issue receipts for those notices:

Name _____

Street _____

City & State _____

Phone Number _____

Mandatory Email:_____

(5) The name, address and phone number of the managing agent. If no managing agent the name, address and phone number of the person who will be responsible for taking care of the dwelling:

Name _____

Street _____

City & State _____

Phone Number _____

Mandatory Email:_____

(6) The name, address and phone number of the superintendent, janitor **or other person** who will provide regular maintenance service:

Name _____

Street _____

City & State _____

Phone Number _____

Mandatory Email:_____

(7) In the event of an emergency, the name, address and phone number of an individual representative of the record owner who may be contacted at any time and is authorized to make emergency decisions concerning the dwelling, including making of repairs and expenditures:

Name _____

Street _____

City & State _____

Phone Number _____

Mandatory Email:_____

(8) The name and address of all mortgage holders on the property:

Name _____

Street _____

City & State _____

Mandatory Email: _____

☐ There is no recorded mortgage on the property.

(9) If fuel oil is used to heat the building and the **landlord furnishes the heat**, name, address and phone number of the fuel oil dealer and grade of oil used:

Company Name _____

Street _____

City & State _____

Phone Number _____

Grade of Fuel Oil _____

☐ The building is not heated by fuel oil.

☐ The building is heated by fuel oil, but the landlord does not furnish the heat.

_____ _____

Date Landlord or Authorized Representative

SEND COMPLETED FORM TO MUNICIPAL CLERK – WITH COPY OF CURRENT LIABILITY INSURANCE CERTIFICATE

Original filed on _____ with the Municipal Clerk of the Borough of South Plainfield

_____

Amy Antonides, Municipal Clerk

AFTER APPROVAL SEND APPROVED FORM TO TENANT