

LICENSE NUMBER: _____
(Official Use Only)

REFERENCE NUMBER: 100 _____
(Official Use Only)

2017/2018 RENTAL PROPERTY APPLICATION

TOWN OF BOONTON

100 Washington Street, Boonton, NJ 07005 (973) 402-9410 Ext. 630/631

SUBJECT PROPERTY INFORMATION:

Location/Address: _____ Boonton, NJ	Block: _____	Lot: _____
Number of Units: _____	Is property owner-occupied (circle on)? YES NO	
If property contains three (3) or more units, provide State Multi-Dwelling Reg. #: _____		
Is heat furnished by landlord? _____		
If "Yes" please provide fuel dealer name, address, and phone number: _____		
Address: _____	Phone#: _____	
Is your floor plan on file: YES NO (If NO, please send with registration) How is the property zoned? _____		

PROPERTY OWNER / AGENT INFORMATION:

Owner Of Record:	
Address:	(Post office boxes alone are not sufficient)
Telephone (Home):	
Telephone (Work):	
Telephone (Cell):	
Email Address:	

"Owner Of Record" is a (check one):

() Individual () Corporation () LLC () Partnership () Trust

GENERAL / CORPORATE PARTNER INFORMATION:

Pursuant to NJS 46:8-28, the landlord shall supply the names and addresses of all general partners and/or corporate officers.

	Name	Address	Title (e.g President)
1			
2			
3			
4			

INDIVIDUAL FOR EMERGENCY AUTHORIZATIONS:

In-County Agent / Manager / Superintendent / Emergency Authorizer

Name:	
Address:	
Telephone (Home):	
Telephone (Work):	
Telephone (Cell):	

MORTGAGE HOLDER INFORMATION *(Use additional sheets if necessary)*

Name:	
Address:	
Telephone (Office):	
Telephone (Fax):	
Telephone (Cell):	

CURRENT TENANT INFORMATION - Including Children *(Use additional included sheets)*

Unit #:	# of residents in dwelling:	# of sleeping rooms:
First & Last Name:	First & Last Name:	First & Last Name:
First & Last Name:	First & Last Name:	First & Last Name:

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APPLICATION FEE *(per dwelling unit):*

Residential Rental Unit	\$25
Multiple Dwellings (3 or more units)	\$20
Change of Tenant	\$25
Re-inspection	\$25

DUE: August 1st, 2017 - Checks may be made payable to the "Town of Boonton" and mailed with your application to Town Hall. You may also drop them off at the construction office between 8:30am and 4pm or place them in the afterhours mailbox at the Town Hall front door.

CERTIFICATION

I certify that the statements and the information submitted are true. I also certify that if I am not the property owner, that I have the consent of the property owner to make this application and that the property owner has full knowledge of the details of the application herewith being submitted. I further certify that the taxes, water and sewer charges are current, smoke and carbon monoxide detectors are installed and functional, and a floor plan is provided.

NOTE: I also understand that the above fees include the cost of an initial inspection. Re-inspections, whether due to non-compliance or inability to gain access for a scheduled re-inspection, will be charged an additional \$25 per re-inspection visit. The cost for all inspections relating to the issuance of a License shall be paid in full no less than 24 hours prior to the scheduled re-inspection.

Printed Name of Applicant _____

Signature of Applicant _____

Date _____

Town Clerk _____

Date _____

Pursuant To N.J.S.A 46:8-27-37

FOR OFFICE USE ONLY:

Date Filed: _____ Amount Paid: \$ _____ () Cash () Check No. _____

Approved: _____ Denied _____

COMMENTS:

Russ Heiney, Chief Code Enforcement Officer