



WEST DEPTFORD TOWNSHIP  
**LANDLORD REGISTRATION**  
 MUNICIPAL CLERK

<b>REGISTRATION TYPE:</b>		<b>New</b>	<b>Renewal</b>	<b>FILED DATE:</b>	
<b>PROPERTY INFORMATION</b>					
Address to Be Registered					
Block	Lot	Qualifier	Unit #(s)	Number of Dwellings in Structure/Building <b>1                      2</b>	
Township Sewer		Private Septic	Township Water	Private Well	
Type of Heat at Property <b>Oil                      Gas</b>		Fuel Oil Supply Dealer Name		Fuel Oil Supply Dealer Phone Number	
<b>OWNER INFORMATION</b>					
Owner Name				Phone Number	
Owner Address				Email Address	
Owner of Property is a: <b>Corporation                      Partnership                      Individual</b>					

*Pursuant to State law (N.J.S.A. 46:8-28), the property owner shall supply the names and addresses of all general partners in the case of a partnership, or corporate officers in the case of a corporation (attach additional pages if necessary).*

<b>TENANT INFORMATION</b>	
Tenant Name	Phone Number
<b>REGISTERED AGENT (if owner of record is a corporation)</b> <b>Owner is not a corporation</b>	
Registered Agent Name	Phone Number
Registered Agent Address	Email Address
<b>MANAGING AGENT</b> <b>There is no managing agent</b>	
Managing Agent Name	Phone Number
Managing Agent Address	Email Address
<b>AUTHORIZED AGENT</b>	
<i>If no owner or managing agent resides in Gloucester County, in which the dwelling is located, please provide contact information for a person who resides in the county is authorized to accept notices from a tenant, issue receipts therefor and to accept service of process on behalf of the record owner.</i>	
Authorized Agent Name	Phone Number
Authorized Agent Address	Email Address

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SUPERINTENDENT/JANITOR/CUSTODIAN		There is no Superintendent/Janitor/Custodian
Name	Phone Number	
Address	Email Address	
EMERGENCY CONTACT		
Emergency Contact Name	Emergency Contact Phone Number (Cell)	
Emergency Contact Address	Emergency Contact Email Address	
BANK/FINANCIAL COMPANY HOLDING A MORTGAGE		There is no recorded mortgage
Mortgage Holder Name		
CERTIFICATE OF OCCUPANCY REINSPECTION		
Have you scheduled your Certificate of Occupancy re-inspection?		If Yes, what is the date of inspection?
<input type="checkbox"/> Yes <input type="checkbox"/> No		
CERTIFICATION		
<p>I hereby certify that the above information is true and that I am the owner/landlord or I am a corporate officer, partner/manager authorized to sign the registration.</p>		
Owner/Landlord Signature	Print Name & Title	Date
OFFICIAL USE ONLY		
DO NOT WRITE BELOW THIS LINE		
Signature of Municipal Clerk		
Date		

*Please complete and forward to:*

Lee Ann DeHart, RMC, Municipal Clerk  
 West Deptford Municipal Building  
 400 Crown Point Road  
 West Deptford, NJ 08086

*If you wish to receive a signed and sealed copy as proof of your filing, please include a self-addressed, stamped envelope.*