



ANNUAL RENT CONTROL LANDLORD  
REGISTRATION STATEMENT

FOR YEAR\_\_\_\_\_

1. PROPERTY OWNER’S AME\_\_\_\_\_
2. PROPERTY OWNER’S ADDRESS\_\_\_\_\_
3. NAME OF MANAGER\_\_\_\_\_
4. PROPERTY OWNER/MANAGING AGENT’S PHONE NUMBER\_\_\_\_\_
5. PROPERTY DESCRIPTION

- A. TOTAL RESIDENTIAL UNITS\_\_\_\_\_OWNER OCCUPIED ( )YES ( )NO
- ( ) APARTMENT
- ( ) SINGLE FAMILY DWELLING
- ( ) MULTI-DWELLING
- ( ) OTHER

B. NUMBER OF BEDROOMS \_\_\_\_\_

6. HOUSING SERVICES

- A. RENT INCLUDES (CHECK ALL THAT APPLIES.)
- |                                      |                                       |
|--------------------------------------|---------------------------------------|
| <input type="checkbox"/> WATER       | <input type="checkbox"/> HEAT         |
| <input type="checkbox"/> ELECTRIC    | <input type="checkbox"/> GAS          |
| <input type="checkbox"/> HOT WATER   | <input type="checkbox"/> SEWER        |
| <input type="checkbox"/> STOVE       | <input type="checkbox"/> REFRIGERATOR |
| <input type="checkbox"/> OTHER _____ | <input type="checkbox"/> FURNITURE    |

7. IS THE BUILDING SUBSIDIZED (FEDERAL OR STATE) ( )YES ( )NO. IF YES, WHICH PROGRAM?

8. CLEARLY FILL IN ALL INFORMATION LISTED BELOW. INDICATE IF THERE ARE ANY VACANT UNITS AND FILL IN THE LAST RENT PAID FOR THAT UNIT. DO NOT LEAVE THE SPACE BLANK. NOTE: ALL MULTIPLE FAMILY DWELLINGS MUST ATTACH THEIR RENT ROLLS.

| RENTAL ADDRESS | TYPE | BLOCK/<br>LOT | TENANT’S NAME | MOVE-IN<br>DATE | PRESENT<br>RENT | REF #<br><small>(FOR OFFICE USE ONLY)</small> |
|----------------|------|---------------|---------------|-----------------|-----------------|---|
|                |      |               |               |                 |                 |   |
|                |      |               |               |                 |                 |   |
|                |      |               |               |                 |                 |   |

**ANNUAL REGISTRATION FEES**

(SECTION 443-26A – REQUIRES THAT ALL UNITS BE REGISTERED WHETHER OCCUPIED OR VACANT)

**\$25.00 PER UNIT**

|                   |                   |        |
|-------------------|-------------------|--------|
| <b>LATE FEES:</b> | 20% AFTER 10 DAYS | \$5.00 |
|                   | 30% AFTER 30 DAYS | \$7.50 |
|                   | 35% AFTER 60 DAYS | \$8.75 |

PLEASE MAKE CHECKS OR MONEY ORDERS PAYABLE TO: CITY OF CAMDEN

MAIL TO: CITY OF CAMDEN

DEPARTMENT OF CODE ENFORCEMENT

OFFICE OF RENT CONTROL

520 MARKET STREET; ROOM 101

CAMDEN, NEW JERSEY 08101

**PROPERTIES MUST BE REGISTERED BY JANUARY 31<sup>ST</sup>**

I HEREBY CERTIFY THAT THE FOREGOING STATEMENTS MADE BY ME ARE TRUE. I AM AWARE THAT IF ANY OF THE STATEMENTS MADE BY ME ARE WILLFULLY FALSE, I AM SUBJECT TO PUNISHMENT UNDER THE PENAL PROVISIONS OF THE RENT CONTROL ORDINANCE.

OWNER SIGNATURE\_\_\_\_\_DATE\_\_\_\_\_

\*\*\*\*\*FOR OFFICE USE ONLY\*\*\*\*\*

DATE REGISTERED\_\_\_\_RECEIPT #\_\_\_\_YEAR\_\_\_\_RECEIVED BY\_\_\_\_\_