

FRANKLIN TOWNSHIP
2093 Rt. 57, POB 547
Broadway, New Jersey 08808

LANDLORD'S REGISTRATION STATEMENT
Pursuant to N.J.S.A. 46:8 - 27

1. *Block _____ , Lot _____ , Property Address _____*
2. *Names and addresses of record owners and leasing agent:*
3. *Names and addresses of registered agent and corporate officers, if owner is corporation:*
4. *If owner is not resident of County in which building is located, address of County Agent for service of process:*
5. *Name and address of managing agent:*
6. *Name and address of regular maintenance personnel:*
7. *Name and address and telephone number of owner's representative in emergency:*
8. *Name and address of every holder of a recorded mortgage:*
9. *Date of preparation of statement:*

Date Received:

Property Owner

Municipal Clerk _____