



# BARNEGAT TOWNSHIP

Clerk's Office \_\_\_\_\_  
Construction Office \_\_\_\_\_  
Property Owner \_\_\_\_\_  
(Completed by Office Personnel)

900 WEST BAY AVENUE  
BARNEGAT, NEW JERSEY 08005-1298  
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## TRUTH IN RENTING – LANDLORD REGISTRATION FORM

**STATEMENT REQUIRED BY P.L. 1974 – CHAPTER 50**

**ALL HOMES BUILT IN 1978 AND PRIOR MUST HAVE A LEAD CERTIFICATION  
PER STATE STATUTE NJSA52:27D437.16**

**\*\*\*\*\*PLEASE TYPE OR PRINT CLEARLY\*\*\*\*\***

**All questions A-G must be filled out completely and Property Owner MUST sign**

**A: RENTAL PROPERTY:**

**TENANT NAME:** \_\_\_\_\_

**RENTAL PROPERTY ADDRESS:** \_\_\_\_\_

**YEAR HOUSE WAS BUILT:** \_\_\_\_\_ **BLOCK** \_\_\_\_\_ **LOT** \_\_\_\_\_ **(Must be filled in)**

**B: PROPERTY OWNER OF RECORD:**

**PERSONAL NAME:** \_\_\_\_\_

**CORPORATION NAME:** \_\_\_\_\_

**ADDRESS:** \_\_\_\_\_

**(No Post Office Boxes)**

**PHONE #:** **DAY** \_\_\_\_\_ **EVENING** \_\_\_\_\_

**EMAIL:** \_\_\_\_\_

**C: PERSON AUTHORIZED TO ACCEPT SERVICE OF PROPERTY:**

**PERSON TO RECEIVE LEGAL NOTICES- (MUST BE OCEAN COUNTY RESIDENT)**

**NAME:** \_\_\_\_\_ **PHONE#** \_\_\_\_\_

**ADDRESS:** \_\_\_\_\_  
**(No Post Office Boxes)**

**D: WHAT TYPE OF HEATING IS USED FOR RENTAL PROPERTY**

**ELECTRIC:** \_\_\_\_\_ **GAS:** \_\_\_\_\_ **OIL:** \_\_\_\_\_

**IF OIL-LIST OIL PROVIDER NAME:** \_\_\_\_\_

**E: PERSON RESPONSIBLE FOR REGULAR MAINTENANCE:**

**NAME:** \_\_\_\_\_ **PHONE#** \_\_\_\_\_

**ADDRESS:** \_\_\_\_\_  
*(No Post Office Boxes)*

**F: MANAGING AGENT – IN CASE OF EMERGENCY:**

**NAME:** \_\_\_\_\_ **PHONE#** \_\_\_\_\_

**ADDRESS:** \_\_\_\_\_  
*(No Post Office Boxes)*

**G: MORTGAGE COMPANY NAME & ADDRESS: (If NO Mortgage, write None)**

**NAME:** \_\_\_\_\_

**ADDRESS:** \_\_\_\_\_

**SIGNATURE OF PROPERTY OWNER:** \_\_\_\_\_

**DATE:** \_\_\_\_\_

*I, DONNA M. MANNO, MUNICIPAL CLERK OF THE TOWNSHIP OF BARNEGAT, COUNTY OF OCEAN,  
STATE OF NEW JERSEY, ACKNOWLEDGE RECEIPT OF THIS LANDLORD TENANT STATEMENT THIS  
\_\_\_\_\_DAY OF \_\_\_\_\_, 202\_\_\_\_.*

: \_\_\_\_\_  
**DONNA M. MANNO, RMC**  
**MUNICIPAL CLERK**