

**New Jersey Department of Community Affairs  
Division of Codes and Standards  
Landlord-Tenant Information Service**

**REGULATIONS FOR THE LANDLORD IDENTITY REGISTRATION  
FORM**

**N.J.A.C. 5:29-1.1**

Printed February 2008

**5:29-1.1 Applicability**

(a) Pursuant to N.J.S.A. 46:8-28 and 46:8-29, the form prescribed by this subchapter is required to be given by landlords to tenants in single unit dwellings and in two - unit dwellings that are not owner-occupied and to be filed in the office of the clerk of the municipality in which any such single unit dwelling or two-unit dwelling is situated.

(b) Tenants in multiple dwellings are required to be given a copy of the certificate of registration filed with the Bureau of Housing Inspection in accordance with N.J.S.A. 55:13A-12, N.J.S.A. 46:8-28 and N.J.A.C. 5:10-1.11. **(Contact the Bureau of Housing Inspection, P.O. Box 810, Trenton, New Jersey 08625 (609) 633-6240 for registration applications for buildings with three or more dwelling units)**

THE ATTACHED FORM IS TO BE FILED WITH THE MUNICIPAL CLERK AND DISTRIBUTED TO TENANTS IN SINGLE UNIT DWELLINGS AND IN TWO UNIT DWELLINGS THAT ARE NOT OWNER-OCCUPIED. **(DO NOT SEND THIS STATEMENT TO LANDLORD-TENANT INFORMATION SERVICE)**

New Jersey Department of Community Affairs  
Division of Codes and Standards  
Bureau of Homeowner Protection  
Landlord-Tenant Information Service  
P.O. Box 805  
Trenton, New Jersey 08625-0805

Similar forms may be obtained from private sources. You may obtain a copy of the form by faxing your request to (609) 984-7954 or by writing to:

**BOROUGH OF UPPER SADDLE RIVER**  
**LANDLORD IDENTITY REGISTRATION FORM**  
for  
**ONE AND TWO-UNIT DWELLINGS – NON-OWNER OCCUPIED**

(All sections must be legible – please print)

Pursuant to N.J.S.A. 46:8-28 and 46:8-29 a "Landlord Identity Registration Form" must be filed with the Borough of Upper Saddle River and distributed to tenant(s) by the owner(s) of a non-owner occupied one or two unit dwellings.

**1) Rental Property Address:** \_\_\_\_\_  
Upper Saddle River, New Jersey 07458

Lot #: \_\_\_\_\_ Block #: \_\_\_\_\_ Qualification #: \_\_\_\_\_

**2) Rental Property Tenant Information:** List name and emergency contact telephone number for the tenant leasing/renting the property. Also indicate length of the lease/rental.

\_\_\_\_\_  
(tenant name) (emergency contact phone number) (length of lease)

**3) Rental Property Ownership:** Indicate type of ownership and list names, addresses and telephone numbers of all property owners of the rental property. Corporations, LLC and Partnerships should list registered agent and all officers or partners. *(If more space is needed insert an additional page)*

*Individual(s):*

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

☐ *Corporation-LLC-Partnership:*

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

If none of the property owners resides within Bergen County list the name, address and telephone number of a person who resides in Bergen County and who is authorized, by the property owner(s), to accept notices from a tenant; to issue receipts for those notices; and to accept service of process on behalf of the out-of-county property owner(s):

**4) Is there a Property Management Agent:** ☐ Yes ☐ No

If "Yes" list name, address and telephone number of Property Managing Agent:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

5) Is there a Superintendent, Janitor or Custodian: ☐ Yes ☐ No

If "Yes" list name, address and telephone number (include dwelling unit, apartment or room number) of the superintendent, janitor, custodian or other person employed to provide regular maintenance service:

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6) Emergency contact information: List name, address and telephone number of an individual, authorized by the property owner(s) or managing agent, who may be contacted at any time in the event of an emergency affecting the dwelling, including such emergencies as the failure of any essential service or system, and who is authorized to make emergency decisions concerning the building, including making repairs and expenditures:

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7) Is there a mortgage on property: ☐ Yes ☐ No

If "Yes" list names, addresses and telephone numbers of all holders of recorded mortgages:

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8) Type of heating fuel: ☐ Fuel Oil ☐ Natural Gas ☐ Propane

Is heating fuel supplied by Landlord: ☐ Yes ☐ No (Tenants responsibility)

If "Yes" list name, address and emergency telephone number of the heating fuel dealer servicing the building. If "Fuel Oil" is used - list grade of fuel:

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COPY OF THIS FORM MUST BE SENT TO THE TENANT

COPY OF THIS FORM MUST BE SENT TO THE BOROUGH OF UPPER SADDLE RIVER

FOR OFFICIAL USE ONLY

Date Registration Form Received: \_\_\_\_\_

Upper Saddle River Borough CCO #: \_\_\_\_\_

\_\_\_\_\_  
Landlord or Authorized Representative Signature      date

\_\_\_\_\_  
Print Landlord or Authorized Representative Name