

WILLINGBORO



TOWNSHIP

N E W J E R S E Y

Inspections Department
One Rev. Dr. Martin Luther King Jr Drive
Willingboro NJ 08046
Phone # 609-877-2200 Ext. 1214 FAX # 609-877-1278

VACANT PROPERTY REGISTRATION APPLICATION FORM

Willingboro Township has enacted Ordinance # 2015-3, to establish a Vacant Property Registration (VPR) as a mechanism to protect neighborhoods from becoming blighted through the lack of adequate maintenance. If the property owner, (defined broadly to include a holder of a mortgage security interest in property subject to lien foreclosure proceedings, or and other interested person) has any question regarding the Township's Vacant Property Registration, please contact Willingboro Township, (609)877-2000, ext 1214.

The Vacant Property Registration Application Form (the "Application") shall be deemed to be complete by the Township when the information required below has been provided to the Inspections Department, the registration fee amount set forth in the fee schedule attached has been paid to the Township, and the Inspections Department has accepted this Application.

Please promptly fill out ALL information requested below. Failure to do so will result in an incomplete registration and possible enforcement/legal action from the Township. **A complete Application and the accompanying fee should be returned within ten (10) days from the date of the accompanying letter to the Township of Willingboro Inspections Department at 1 Rev. Dr. Martin Luther King, Jr. Drive, Willingboro, NJ 08046.** The initial registration fee shall be valid for on (1) calendar year from the date of registration. Thereafter, registrations fees are due annually (1) calendar year from the previous renewal and must be received within 15 days after the renewal date. Registration fees will not be prorated or refunded. If you wish to have a copy of the permit, please provide an e-mail address or enclose a self-addressed stamped envelope.

Any owner who is not in full compliance with this ordinance or who otherwise violates any provision of this ordinance or the rules and regulations issued hereunder shall be subject to a fine of not less than \$500.00 and not more than \$1000.00 for each offense. Every day that a violation continues shall constitute a separate and distinct offense. Fines assessed under this chapter shall be recoverable from the owner and shall be a lien on the property.

The information set forth below in this Application needs to be provided to the Township by the Property Owner or the agent of the Property Owner, to initiate the Vacant Property Registration process with the Township.

Vacant Property Registration Fee Schedule (Amended March 2, 2021)

Initial registration	\$500
First renewal	\$750
Second renewal	\$1000
Any subsequent renewal	\$1500

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NEW JERSEY

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REGISTRATION FORM FOR
ABANDONED/VACANT RESIDENTIAL PROPERTIES
(PRINT OR TYPE)

BLOCK _____ LOT _____

1. _____
ADDRESS OF SUBJECT DWELLING _____ WARD _____

2. _____
PROPERTY OWNER'S NAME _____ TELEPHONE # _____

3. _____
PROPERTY OWNER'S ADDRESS _____ CITY _____ STATE _____ ZIP _____

EMAIL _____

4. _____
NAME OF MANAGING AGENT AUTHORIZED TO ACT WITH RESPECT TO THE VACANT PROPERTY _____

NJ ADDRESS ONLY _____ CITY _____ STATE _____ ZIP _____

TELEPHONE # _____ EMAIL _____

5. PROPERTY DESCRIPTION: TOTAL RESIDENTIAL UNITS: _____ COMMERCIAL: _____

A. Number of stories: _____

B. Date property was acquired: _____

C. Does "owner" intend to restore property to productive use and occupancy in the next 12 months
Yes _____ No _____

D. Is property currently:

1. Enclosed and secured from unauthorized entry: (Boarded-up) Yes _____ No _____

2. Sign affixed to building indicating the name, address and telephone number of the owner and owner's authorized agent? (no smaller than 18 x 24") Yes _____ No _____

3. Who will maintain the building and sign in a secure and closed condition until building is again occupied, demolished and/ or rehabilitation is completed?

I CERTIFY THAT THE FOREGOING STATEMENTS MADE BY ME ARE TRUE. I AM AWARE THAT IF ANY OF THE FOREGOING STATEMENTS MADE BY ME ARE WILLFULLY FALSE, I AM SUBJECT TO PUNISHMENT BY LAW.

OWNER'S SIGNATURE

DATE



Willingboro Police Department
1 Rev. Dr. MLK Drive, Willingboro, NJ 08046
PH: (609) 877-3001 FAX: (609) 835-0938



POWER OF ATTORNEY AUTHORIZATION

**FOR THE ENFORCEMENT OF CRIMINAL LAWS, MOTOR VEHICLE
LAWS & TOWNSHIP ORDINANCES**

I, _____, residing at _____
(Print full Name) (Street Address)
_____, _____
(City & State) (Phone Number)

am the legal property owner or manager of: _____
(Name of Property)

Willingboro, NJ. I hereby authorize the Willingboro Police Department to enter the above mentioned property in order to enforce all criminal laws, motor vehicle laws, disorderly person offenses and any other violation of Township Ordinance.

In addition, the Willingboro Township Police Department is hereby authorized to effect any and all arrests for any violation of any law or ordinance. This Power of Attorney shall commence on _____ and shall remain in effect until such time as I am no longer the legal owner of said property or until this Power of Attorney is rescinded. In either case, notarized notification in writing shall be made to the Director of Public Safety.

Signed: _____ Owner _____ Manager

Dated: _____

Sworn to and subscribed before me
This _____ day of _____ 20__.

Notary Seal

Signature of Notary