Town of Phillipsburg

OFFICE OF INSPECTIONS

120 FILMORE STREET
PHILLIPSBURG, NJ 08865

Phone: 908-454-5500 ext. 341 or 346
Email - planningboard@phillpsburgnj.org
Town Website: www.phillipsburgnj.org

Registration for Licensing Rental Property

(*Office Use Only*)

License #: _____

_____

_____

Unit count: _____

(*Office Use Only*)

Application Date: _____

Payment Year: _____

Amount: _____

Cash/Check #: _____

$100 per unit fee is due on May 1st of every year
Certificate of Habitability must be renewed every year
Please call the inspections department for an appointment

Pursuant to Chapter 464 (Rental Property) of the Phillipsburg Town Code, the owner of every rental property shall file a registration statement on an annual basis on or before May 1st of each year. Kindly fill out both sides of this application. Only one form is required for each property.

Property Address: _____ Block: _____ Lot: _____

Business Name: _____

Owner Full Name: _____

Owner Address: _____

_____

Phone: _____ Cell: _____

Email: _____

Would you like inspection reports and certificates to be e-mailed? ( ) Yes ( ) No

Managing Agent: _____

Agent Address: _____

Phone: _____ Cell: _____

Email: _____

Provide the **names of the tenants** who are on the lease agreement and authorized to reside at the home or apartment, and **include all children** over 2 years of age. **Please separate the tenants** according to their apartment:

_____

_____

_____

_____

_____

_____

_____

Please identify **type & quantity** of all animals in each unit:

_____

_____

_____

_____

Kindly **check** or provide an answer to the following questions:

Number of Apartments/Units: _____ Number of years you have rented this property: _____

1. Type of rental property:

   ( ) Single Family

   ( ) Two Family Duplex (Side by Side)

   ( ) Two Family (Up & Down)

   ( ) Multi-family Dwelling

   ( ) Commercial Building with Apartments

2. Are you (the landlord) responsible to provide heat or other utilities? ( ) Yes ( ) No

   ( ) Heat ( ) Hot Water
   ( ) Water ( ) Electric

3. Fuel Oil Co. (if applicable): _____

4. Have you provided the floor plans to this home or property? ( ) Yes ( ) No

   If no: **Please provide a detailed floor plan on a separate page**. Items required to include: Exterior/Interior doors & windows, stairwell locations, room names & approx. dimensions.

Signature: _____ Date: _____