



TOWNSHIP OF HILLSIDE
UNION COUNTY, NEW JERSEY
MUNICIPAL BUILDING
JOHN F. KENNEDY PLAZA
1409 LIBERTY AVENUE
HILLSIDE, NEW JERSEY 07205
PHONE: (973) 926-3000; FAX (973) 351-5471
www.HillsideNJ.us

VACANT PROPERTY REGISTRATION

To: Clerk of Township of Hillside

Pursuant to the New Jersey Landlord Act, N.J.S.A 46:8-27 et seq., I hereby file the following registration statement with your office for the property located at _____ in the Township of Hillside and County of Union.

1. Name and address of the owner of the property:

2. Name and address of the owner of the rental agent

3. If record owner of property is a corporation.

- a. Name and address of registered agent of the corporation:

- b. Name and address of the officers of the corporation

4. Name of the person located in the county in which the property is located who is authorized by the owner of the property to accept and sign a receipt for notices from tenants and to accept service of process:

5. Name and the address of managing agent (if any):

6. Name and address (including apartment number) of maintenance employee:

7. Name and address and telephone number of emergency representative of the owner or managing agent to be available 24 hours per day:

8. Name and address of all holders of recorded mortgages:

9. Name and address where tenants may obtain crime insurance applications through the Federal Crime Insurance Program, Title VI of the Housing and Urban Development Act of 1970:

Sign: _____

Date: _____