## **TOWNSHIP OF OCEAN**

50 Railroad Avenue, Waretown, New Jersey 08758 Tele: (609) 693-3302 \* Fax: (609) 693-9026



## LANDLORD IDENTITY REGISTRATION STATEMENT ONE AND TWO-UNIT DWELLING REGISTRATION FORM

<b>Property Information:</b>						
Block & Lot:						
Property Address:		City:		State:	Zip:	
Tenant Information:	M2-11 6-7					
Tenant 1 (Last Name, First Name):		dia Control				
Tenant 2 (Last Name, First Name):	19619					
Tenant 3 (Last Name, First Name):	Dept. day	14				
Tenant 4 (Last Name, First Name):  Names and addresses of all record	owners of the buildin	ig or rental busine	ess:	i i		
Corporation/Company:						
Owner 1:	Owner 2:			Owner 3:		
Address:	Address:			Address:		
City:	City:			City:		
State/Zip:	State/Zip:	-		State/Zip:		
Country (if other than USA):	Country (if o	ther than USA):		Country (if other than USA):		
<b>Emergency Contact Information:</b>						
Name:		State/Zip:	:			
Address:		Phone:	Phone:			
City:		Additiona	Additional Phone:			
Mortgage Information:	Aspenius f		Check if the	ere is NO	MORTGAGE on this property.	
Company 1:		Company	2:			
Contact:		Contact:			_	
Address:		Address:				
City:		City:	City:			
State/Zip:		State/Zip:	State/Zip:			

Agent 1:	Agent 2:		
Company 1:	Company:		
Address:	Address:		
City/State/Zip:	City/State/Zip:		
	Phone:		
Phone:	r none.		
Managing Agent:	Check if there is NO MA	NAGING AGENT for this property	
Name (Last Name, First Name):			
Address:	<u> </u>		
City/State/Zip:			
Phone:			
Fuel Company: The building is not heated by fuel oil. The building is heated by fuel oil, but the lateral control of the second control of the se	andlord does not furnish heat.		
	Phone:		
Company: Address:	Phone: Fuel Type:	Gas	
Company: Address:	Phone:	Gas Oil Electric Propane Other	
Company: Address:	Phone: Fuel Type:	Oil Electric Propane	
Company: Address:	Phone: Fuel Type:	Oil Electric Propane	
Company: Address:	Phone: Fuel Type:	Oil Electric Propane	
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