

TOWNSHIP OF ABERDEEN
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ANNUAL REGISTRATION FOR RENTAL DWELLING UNIT

**CHANGE OF OCCUPANCY \$150.00 NON REFUNDABLE FEE
PAYABLE TO TOWNSHIP OF ABERDEEN**

OWNER(S) NAME AND ADDRESS

ADDRESS OF RENTAL PROPERTY _____

BLOCK _____ LOT _____ QUALIFER _____ UNIT # _____

TENANT(S) NAME(S) _____

TELEPHONE # _____ CELL # _____

NAME/DATE OF BIRTH OF EACH DEPENDENT _____

CONTACT PERSON _____

ADDRESS _____

TELEPHONE # _____ CELL # _____

I am aware I must obtain a Certificate of Occupancy for each new occupant from the enforcing Fire District and the Aberdeen Township Housing Inspector prior to any new occupancy. I am also aware that failure to make an application for inspection and obtain the required certificates of occupancy for a change in occupancy will result in a summons being issued.

SIGNATURE OF OWNER/AGENT

DATE OF APPLICATION

OFFICE USE:

REGISTRATION # _____

ISSUE DATE: _____

EXPIRATION DATE: _____

OPEN PERMITS _____