

JAMES DALY, Mayor

BOROUGH COUNCIL MEETS
1st & 3rd Tuesdays @ 7:00 p.m.
Community Center
13 Asbury Avenue
Farmingdale, NJ 07727



MUNICIPAL BUILDING
11 Asbury Avenue
Farmingdale, NJ 07727

Borough Office Hours
8:30 a.m. to 4:00 p.m.
Phone 732-938-4077
Fax: 732-938-2023

As a landlord of a home or business, this registration must be filed with the Borough of Farmingdale for each piece of property with rental units. Please complete this form and return it no later than January 30th

Rental Property Information:

Block # _____ Lot # _____ Total # of Units per Building _____

Street Address _____

Heating Source (circle one): Natural Gas Electric Propane Fuel Oil

If fuel oil is used—Please provide the name and address of the fuel oil dealer servicing the unit and the grade of fuel oil used:

Fuel Oil Supplier & phone # _____

Owner Information: Include all general partners if partnership; shareholders, record owners if a corporation; and member of a limited liability co.

Owner's Name: _____

Mailing Address: _____

Work Phone _____ Home Phone _____ Cell _____

Email: _____

Manager and/or Emergency Contact:

Name: _____

Address and/or Phone # _____

Tenant Information:

For each unit you must provide Name, Gender, Adult or Child of each and **every** tenant:

Block: _____ Lot: _____ Street Address _____

Apartment # _____ Number of bedrooms _____ Number of Tenants _____

Last name	First name	Adult/Child	Gender
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_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

_____ Indicate if tenant has pets _____ Dog(s) _____ Cat(s) _____ Any other pets

Block: _____ Lot: _____ Street Address _____

Apartment # _____ Number of bedrooms _____ Number of Tenants _____

Last name	First name	Adult/Child	Gender
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_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

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_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

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