

**NEPTUNE TOWNSHIP RENT LEVELING BOARD
TENANT COMPLAINT FORM**

TENANT(S) _____ CASE NUMBER _____
ADDRESS _____ DATE _____
BLDG # _____ APT# _____ NO. OF ROOMS _____
TELEPHONE # _____ TOTAL SQ. FEET _____

LEASE

WRITTEN: YES _____ NO _____ COMMENCEMENT DATE _____
EXPIRATION DATE _____ CURRENT RENT \$ _____
NEW RENT \$ _____ DATE OF LAST INCREASE _____
AMOUNT OF LAST INCREASE \$ _____ ADDITIONAL SURCHARGE \$ _____
CAPITAL IMPROVEMENTS \$ _____

WERE YOU INFORMED OF RENT INCREASE: ORALLY _____ or/IN WRITING _____

LANDLORD'S NAME _____
LANDLORD'S ADDRESS _____
LANDLORD'S TELEPHONE NUMER _____

IN THE SPACE PROVIDED, PLEASE STATE THE NATURE OF YOUR COMPLAINT

HEARING DATE* _____ **TIME** _____
PLACE: NEPTUNE TOWNSHIP MUNICIPAL HALL, 25 NEPTUNE BLVD., NEPTUNE, 2ND FL.
*(HEARING DATE WILL BE DETERMINED BY THE RENT LEVELING BOARD UPON RECEIPT OF COMPLAINT)

I INTEND TO TESTIFY AT THE PUBLIC HEARING SCHEDULED IN THIS MATTER.

Tenant Signature
Print name: _____

PLEASE NOTE: ONCE YOU RECEIVE THE HEARING DATE, YOUR LANDLORD MUST BE SERVED WITH A COPY OF YOUR COMPLAINT NOT LATER THAN 15 DAYS BEFORE THE BOARD'S SCHEDULED HEARING DATE. SERVICE MAY BE MADE PERSONALLY OR BY SENDING A COPY OF THE COMPLAINT TO YOUR LANDLORD BY CERTIFIED MAIL/RRR, ADDRESSED TO LANDLORD'S REGULAR ADDRESS.

CERTIFICATION

I CERTIFY THAT I SERVED THIS COMPLAINT UPON MY LANDLORD AS PROVIDED ABOVE BY PERSONEL DELIVERY/MAILING CERTIFIED MAIL/RRR (cross out one) A TRUE COPY OF THE SAME TO MY LANDLORD ON THE _____ DAY OF _____ 20____. I CERTIFY THAT THE FOREGOING STATEMENTS MADE BY ME ARE TRUE. I AM AWARE THAT IF ANY OF THE STATEMENTS ARE WILFULLY FALSE, I AM SUBJECT TO PUNISHMENT.

Tennant
Print name: _____

TO LANDLORD: THE ABOVE COMPLAINT HAS BEEN FILED WITH THE RENT LEVELING BOARD OF THE TOWNSHIP OF NEPTUNE. A HEARING WILL BE HELD AT THE DATE, TIME AND PLACE INDICATED ABOVE. IF YOU WISH TO BE HEARD IN THIS MATTER, YOU HAVE THE RIGHT TO APPEAR AND BE HEARD. IF YOU FAIL TO APEAR, THE BOARD MAY RENDER A DECISION ON THE COMPLAINT IN YOUR ABSENCE.