

TOWNSHIP OF NEPTUNE
TENANT REGISTRATION FOR MULTIPLE DWELLINGS
VACANCY DECONTROL APPLICATION

PLEASE INDICATE THE FOLLOWING:

Date: _____

Real Property Address _____

Name of Complex and Unit Number _____

Block _____ Lot _____

Owner's Names _____

Owner's Telephone # _____

Owner's Address _____

Supervisor's Name _____

Supervisor's Telephone # _____

Previous Tenant _____

Amount of Rent _____

New Tenant _____

Amount of Rent _____

Number of Bedrooms _____

Please return to the following address:

Township of Neptune
c/o Rent Leveling Board
P.O. Box 1125
Neptune, New Jersey 07754-1125