



Department of Community Affairs  
 Division of Codes and Standards  
 Licensing and Inspections Element  
 Bureau of Housing Inspection  
 101 South Broad Street, PO Box 810  
 Trenton, New Jersey 08625-0810

RE:  
 REGISTRATION NO.:

Multiple Dwellings, including condominiums and cooperatives, which contain 3 or more units of dwelling space; Hotels which contain 10 or more units of dwelling space or have sleeping facilities for 25 or more persons or, are commonly regarded as a hotel, motor hotel, motel, or established guesthouse in the community in which they are located, and non-profit Retreat Lodging Facilities must be registered with the Bureau of Housing Inspection as required by the Hotel and Multiple Dwelling Law, N.J.S.A. 55:13A-1 et seq.

Bureau records indicate that the above referenced building, owned by you, is subject to these registration requirements.

If this information is correct, you are required by law to file a Certificate of Registration with the Bureau of Housing Inspection, using the attached form, within 30 days of receipt of this notice.

If this information is incorrect, please notify the Bureau immediately.

If any of the information submitted on this form should change, an owner must submit an amended Certificate of Registration within 30 days of such change. No fee shall be charged for the filing of an amended Certificate of Registration, except in the case of a change in ownership wherein the submission of a new Certificate of Registration is required.

Failure to comply with the terms of this notice may subject you to the immediate entry of a docketed judgment against you, for a penalty in the amount of \$200.00 per building, pursuant to N.J.S.A. 55:13A-12(d).

NOTICE OF VIOLATION AND ORDER TO REGISTER

--	--

IMPORTANT: RETAIN THIS NOTICE FOR YOUR RECORDS

New Jersey Department of Community Affairs  
 Bureau of Housing Inspection  
 CERTIFICATE OF REGISTRATION

A fee of \$10.00 is required for each building registered. Please complete, detach and submit this form with the required fee of \$10.00, payable by U.S. Postal Service money order, certified check or cashier's check only, to: N.J. Bureau of Housing Inspection, within 30 days of receipt of this notice.

If your property consists of a complex of buildings, you must complete this Certificate of Registration for the first building and a Supplemental Certificate of Registration for each additional building, and submit with the corresponding fee of \$10.00 for each building registered.

PRINT or TYPE all information. See instructions on reverse side of this form.

1. Is This An Amended Certificate? <input type="checkbox"/> Yes <input type="checkbox"/> No		2. Previous Registration Number, If Any _____	
3. BUILDING No.: _____ of _____ TOTAL BUILDINGS		4. BUILDING USE (check one) 1. <input type="checkbox"/> Multiple Dwelling      2A. <input type="checkbox"/> Hotel      2B. <input type="checkbox"/> Seasonal Hotel 2C. <input type="checkbox"/> Guest House      2D. <input type="checkbox"/> Dormitory      3. <input type="checkbox"/> Retreat Lodging Facility	
5. FORM OF OWNERSHIP (check one) 0 <input type="checkbox"/> Corporation      1 <input type="checkbox"/> Private (Individual or Family)      2 <input type="checkbox"/> Legal Partnership 3 <input type="checkbox"/> Condominium      4 <input type="checkbox"/> Cooperative      5 <input type="checkbox"/> Public Housing Authority			
6. Number of: Dwelling units _____ Rooming units _____ Total _____	7. STORIES _____	8. YEAR CONSTRUCTED <input type="checkbox"/> a.) Before 1977 _____/_____ (mo.) (yr.) <input type="checkbox"/> b.) After 1/1/77 Date Cert of Occ. Issued ____/____/_____ (Attach Copy) (mo.) (yr.)	9. LIFE HAZARD Registered as Life-Hazard Use As per Uniform Fire Code <input type="checkbox"/> Yes <input type="checkbox"/> No If Yes, DFS Reg. No.: # _____
10. CONSTRUCTION 1 <input type="checkbox"/> Masonry & Concrete 2 <input type="checkbox"/> Masonry & Steel 3 <input type="checkbox"/> Exterior Masonry Wall & Frame 4 <input type="checkbox"/> Frame		11. DATE OF TRANSFER OF OWNERSHIP _____	
12. TAXES PAID TO: Municipality _____ County _____			
13. OWNER		Name _____ Fed. ID # or Soc. Sec. # _____	
		Address (P.O. Box not acceptable) _____ County, if in N.J. _____	
		City _____ State _____ Zip _____ Phone (____) _____	
14. BUILDING		Block # _____ Lot # _____ Name of Building (if any) _____	
		Address Number _____ Street _____	
		City _____ State N.J.	
15. IN COUNTY AGENT		Name _____	
		Address (P.O. Box not acceptable) _____	
		City _____ Zip _____ County _____ Phone (____) _____	
16. MANAGER		Name _____	
		Address _____	

<b>17. MORTGAGEE</b>	Name			
	Address			
	City		State	Zip
<b>18. Net lessee or any other person in control of the property (other than record owner)</b>	Name			
	Address			
	City		State	Zip
<b>19. Corporate officers or general partners</b>	Name		Title (if any)	
	Address			
	City		State	Zip
	Name		Title (if any)	
	Address			
	City		State	Zip
	Name		Title (if any)	
	Address			
<b>20. Registered agent (if under corporate ownership)</b>	Name			
	Address			
	City		State	Zip
<b>21. Multiple dwelling Janitor or supt. (if 9 or more units.)</b>	Name		Phone ( )	
	Address		Apt./Rm. #	Bldg. #
	City		State	Zip
<b>22. Individual who can authorize emergency repairs and expenditures</b>	Name			
	Address			
	City		State	Zip
<b>23. Fuel oil supplier</b>	<input type="checkbox"/> Building is not heated by fuel oil. Grade of fuel oil used:			
	Name			
	Address			
	City		State	Zip

RETURN CERTIFICATE AND \$10.00 FEE TO:

Department of Community Affairs  
 Division of Codes and Standards  
 Licensing and Inspection Element  
 Bureau of Housing Inspection  
 101 South Broad Street, PO Box 810  
 Trenton, New Jersey 08625-0810

X \_\_\_\_\_ Date: \_\_\_\_\_  
 Owner Signature

X \_\_\_\_\_  
 Print or Type Name

**COMPLETE THE ENCLOSED CERTIFICATE AND RETURN WITH REQUIRED FEE OF \$10.00**

*(No Fee Required for Amended Certificate)*

**INSTRUCTIONS**

Enclose a fee of \$10 for each Certificate of Registration and Supplemental Certificate of Registration submitted (other than an amended certificate). You may enclose one check or money order to cover several certificates mailed in the same envelope. Make check or money order payable to the Bureau of Housing Inspection. **DO NOT MAIL CASH. DO NOT USE POST OFFICE BOX NUMBERS FOR ADDRESSES.**

- Item 1:** If you have previously registered as the owner of this building and are filing a certificate form because you are required to report changed information, you are filing an amended certificate. No fee is required for an amended certificate.
- Item 2:** Answer only if you have been given or shown a registration certificate issued by the Bureau of Housing Inspection to the previous owner.
- Item 3:** For a building which is not part of a complex, enter 1 for both the Building No. and Total Buildings. For a building which is part of a complex, enter the individual building number and the total number of buildings in the complex.
- Item 4:** A **multiple dwelling** containing three or more units must be registered. When determining the total number of units, count both those that are rented as well as those that are owner-occupied. **Hotels** are buildings with 10 or more sleeping units or facilities for at least 25 people, providing accommodations to transient or permanent guests. Properties commonly regarded in their communities as motels, motor hotels or established guesthouses are "**hotels**" regardless of the number of units. **Guest houses** as well as **non-state owned dormitories** are considered sub-categories of HOTEL in the Hotel and Multiple Dwelling Law; they are further classified as **life hazard buildings** in the New Jersey Uniform Fire Code (N.J.A.C. 5:18-1.5 and N.J.A.C. 5:18-2-4A(c), (f) & (h)), and therefore must **also** be registered with the local municipal Fire Official or the New Jersey Bureau of Fire Safety. **Retreat lodging facilities**, as defined in the Hotel and Multiple Dwelling Law, are buildings owned by tax-exempt, non-profit corporations, having sleeping facilities used exclusively on a transient basis by persons participating in programs of a religious, cultural or educational nature. **Rooming and boarding houses** are subject to the Rooming and Boarding House Act of 1979 (N.J.S.A. 55:13B-1 et seq.) and owners are required to be licensed by the Bureau of Rooming and Boarding House Standards, PO Box 804, Trenton, N.J. 08625-0804. They are **not** to be registered with the Bureau of Housing Inspection.
- Item 6:** Enter the number of dwelling units (apartments), rooming units and, total. Do not count as rooming units those rooms that are part of a dwelling unit (apartment) and not rented separately.
- Item 7:** Do not count as a story any level that is wholly or partially below ground.
- Item 8:** If the answer is a.) before 1977, enter the month and year the building was constructed. If the answer is b.) after 1/1/77, enter the month and year in which the Construction Official issued a Certificate of Occupancy for new construction or substantial rehabilitation, and attach a copy of the Certificate of Occupancy.
- Item 9:** Multiple dwelling of seven or more stories; hotels/motels and retreat lodging facilities of 2 or more stories, with interior stairways and all guest houses and non-state owned dormitories are classified by the New Jersey Uniform Fire Code as life hazard buildings. As such they must also be registered with the local municipal Fire Official or the New Jersey Division of Fire Safety and the registration number then assigned must be entered under item #9.
- Item 11:** Enter the complete date of closing.
- Item 13:** If a corporation, enter the full corporate name and business address. If a condominium, note that all properties in condominium ownership are required by law to have associations. Enter the name of the condominium association c/o the name and address of the individual who maintains the association's records.
- Item 14:** Enter block and lot numbers. They can be obtained from the municipal tax office. Enter the name, if any, of the building or project. Enter the full number and street name. For attached houses, enter the complete number (e.g. 234-238 Main Street).
- Item 15:** Enter the name and address of an agent, person or corporation, **who must reside or maintain an office in the county in which the property is located**, authorized to receive service of process on behalf of the record owner and such orders or notices as may be issued by the Bureau of Housing Inspection. If the agent is a corporation, it must be licensed to do business in New Jersey. The owners name and address can be entered here as the agent, if the owner resides or maintains an office in the county.
- Item 16:** The manager is the person or firm responsible for the maintenance of the building. If the owner or agent is the manager, so indicate. Otherwise, enter the manager's name, address and telephone number.
- Item 17:** Enter the name and address of the first mortgage holder. If there are other mortgage holders as well, list them on a separate sheet of paper.
- Item 18:** Enter the name, address and telephone number of any person other than the record owner who exercises control over the property.
- Item 19:** Enter the names, addresses and titles (if any) of any corporate officers or general partners. If additional space is needed, use a separate sheet of paper.
- Item 20:** If the owner is a corporation, enter the name and registered office address of the registered agent. This information should be the same as that appearing on the records of the New Jersey Secretary of State. This must also be completed for condominiums, cooperatives and Public Housing Authorities that are under corporate ownership.
- Item 21:** In multiple dwellings of nine or more dwelling units the owner shall either perform the janitorial services personally, if a resident owner, or provide a janitor, or 24-hour a day janitorial services. If required, enter the name and address, including apartment or room number, of the person or janitorial service responsible for building maintenance.
- Item 22:** Enter the name, address and telephone number of an individual authorized to make emergency decisions concerning repairs and expenditures for such repairs.
- Item 23:** Enter the name and address of the fuel oil dealer who regularly supplies the building and the grade of fuel oil used. If the building is not heated by fuel oil, so indicate.

To obtain a copy of the **N.J. Hotel and Multiple Dwelling Law**, send \$1.00 to the **N.J. Department of Community Affairs, Division of Codes and Standards, Licensing and Inspection Element, Bureau of Housing Inspection, 101 South Broad Street, PO Box 810, Trenton, New Jersey 08625-0810. Chapter 10 Regulations for the Maintenance of Hotels and Multiple Dwellings** is also available at a cost of \$5.00. **Please Do Not Send Cash.**