



BOROUGH OF SEA GIRT
SEA GIRT, NEW JERSEY



Dear Landlord/Realtor:

Attached is an application for Landlord Leasing License. Please return completed application together with a copy of the rental agreement (lease) directly to this office. The application must contain the names and permanent addresses of all legal tenants. Be aware that each new tenancy will require a new application for Certificate of Occupancy and the new rental agreement (lease) must be attached with the names and permanent addresses of all tenants.

Applications MUST BE legible (typed or printed, neatly) and fully completed or it will be returned to applicant for proper completion.

****Please submit applications to the Clerk's Office****

FEES:

C.O.	\$100.00 EACH RENTAL
LICENSE	\$250.00 FOR THE SEASON
CHANGE IN TENANT	\$25.00 FOR EACH CHANGE

321 BALTIMORE BOULEVARD
P.O. BOX 296, SEA GIRT, N.J. 08750
TEL. 732-449-9433 FAX 732-974-8296



BOROUGH OF SEA GIRT
SEA GIRT, NEW JERSEY



CHECKLIST FOR LANDLORD LEASING LICENSE

****LICENSE WILL NOT BE ISSUED WITHOUT THIS INFORMATION****

1. License Application filled out completely and legibly, which includes a list of **all tenants**.
2. A local contact person (agent or real estate agent) for the Police Department to contact in an emergency
3. Property Maintenance Code Application for C.O. filled out.

After information is submitted it will be reviewed and once it is determined that all the information has been provided the C.O. Application will be given to Jim Quigley, Code Enforcement Officer for inspection.

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SEA GIRT ORD. #2007-17

APPLICATION FOR THE LICENSING OF PERSONS LEASING ANY FURNISHED OR UNFURNISHED HOUSING OR LIVING UNIT FOR RESIDENTIAL PURPOSES IN THE BOROUGH OF SEA GIRT, NEW JERSEY.

PROPERTY ADDRESS: _____

OWNER OF PREMISES: _____

ADDRESS: _____ PHONE: _____

CITY: _____ STATE: _____ ZIP: _____

IF THE ADDRESS OF THE RECORD OWNER IS NOT LOCATED IN THE COUNTY WHERE THE PREMISES ARE LOCATED THE NAME AND ADDRESS OF A PERSON WHO RESIDES IN OR HAS AN OFFICE IN THE COUNTY WHICH THE PREMISES ARE LOCATED AND IS AUTHORIZED TO ACCEPT NOTICES FROM A TENANT AND TO ISSUE RECEIPTS THEREFORE AND TO ACCEPT SERVICES OF PROCESS ON BEHALF OF THE RECORD OWNER.

NAME: _____

ADDRESS: _____ PHONE: _____

CITY: _____ STATE: _____ ZIP: _____

INDIVIDUAL REPRESENTATIVE OF THE RECORD OWNER OR MANAGING AGENT TO BE REACHED IN THE EVENT OF AN EMERGENCY. (USE REVERSE SIDE IF NEEDED)

NAME: _____

ADDRESS: _____ PHONE: _____

CITY: _____ STATE: _____ ZIP: _____

DATED:

DATE RECORDED WITH
THE BOROUGH OF SEA GIRT

SIGNED

Proof of compliance with Certificate of Occupancy provisions of Ordinance #541

CO# _____

Maximum Occupancy _____

Date: _____

Code Official: _____

PLEASE LIST THE NAMES AND PERMENANT ADDRESSES OF ALL TENANTS. PRINT CLEARLY OR TYPE.

NAME: _____
ADDRESS: _____ PHONE: _____
CITY: _____ STATE: _____ ZIP: _____

NAME: _____
ADDRESS: _____ PHONE: _____
CITY: _____ STATE: _____ ZIP: _____

NAME: _____
ADDRESS: _____ PHONE: _____
CITY: _____ STATE: _____ ZIP: _____

NAME: _____
ADDRESS: _____ PHONE: _____
CITY: _____ STATE: _____ ZIP: _____

NAME: _____
ADDRESS: _____ PHONE: _____
CITY: _____ STATE: _____ ZIP: _____

NAME: _____
ADDRESS: _____ PHONE: _____
CITY: _____ STATE: _____ ZIP: _____

NAME: _____
ADDRESS: _____ PHONE: _____
CITY: _____ STATE: _____ ZIP: _____

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ADDRESS: _____ PHONE: _____
CITY: _____ STATE: _____ ZIP: _____

NAME: _____
ADDRESS: _____ PHONE: _____
CITY: _____ STATE: _____ ZIP: _____

NAME: _____
ADDRESS: _____ PHONE: _____
CITY: _____ STATE: _____ ZIP: _____

NAME: _____
ADDRESS: _____ PHONE: _____
CITY: _____ STATE: _____ ZIP: _____

(Cont'd)

NAME: _____

ADDRESS: _____ PHONE: _____

CITY: _____ STATE: _____ ZIP: _____

NAME: _____

ADDRESS: _____ PHONE: _____

CITY: _____ STATE: _____ ZIP: _____

NAME: _____

ADDRESS: _____ PHONE: _____

CITY: _____ STATE: _____ ZIP: _____

NAME: _____

ADDRESS: _____ PHONE: _____

CITY: _____ STATE: _____ ZIP: _____

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NAME: _____

ADDRESS: _____ PHONE: _____

CITY: _____ STATE: _____ ZIP: _____

NAME: _____

ADDRESS: _____ PHONE: _____

CITY: _____ STATE: _____ ZIP: _____

NAME: _____

ADDRESS: _____ PHONE: _____

CITY: _____ STATE: _____ ZIP: _____

PLEASE TYPE OR PRINT

BOROUGH OF SEA GIRT

Date: _____

Property Maintenance Code Application

C.O. _____

Sale/Rental _____

Inspection Date Requested _____

Yearly ()

Winter ()

Summer ()

Address of Property _____

Present Owner of Property _____

Address _____ Phone # _____

Name of Prospective Owner or Tenant _____

Address _____ Phone # _____

Date of Occupancy _____

Check Type of Dwelling: 1 Family () Apt. () Other () Specify _____

Number of Occupants: Adults _____ Children _____ # of Bedrooms _____

Minimum Fee: \$100.00

Reinspection Fee: \$50.00

Rental Units in excess of five (5) bedrooms - \$10.00 per room - Maximum - \$100.00

Application must be in 10 days prior to occupancy.

Failure to make application for inspection and obtain a Certificate of Inspection for each dwelling unit is punishable by a fine not to exceed \$2,000.00.

Owner/Agent's Signature

FOR OFFICIAL USE ONLY

Bedrooms - Area #1 _____ #2 _____ #3 _____ #4 _____

Baths # _____ Fixtures- Commode _____ Sink _____ Tub _____ Shower _____

Kitchen _____ Appliances _____

Electrical Service _____

Plumbing _____ Hot Water _____

Screens _____ Egress _____

Roof _____ Ceilings & Walls _____

Cellar _____ Chimney _____

Attic _____ Crawl Space _____

Structural Defects _____

Paint & Appearance _____ Smoke Detectors _____

Grounds _____ Other Buildings _____

Heating _____ Type _____

Fee: \$ _____ Received by: _____

Inspection by: _____ Date: _____

Reinspection Date: _____