

#### Please type or print clearly

### APPLICATION FOR RENTAL MERCANTILE LICENSE Township Code §208

Please make all checks payable to: Eagleswood Township 146 Division Street West Creek, NJ 08092 Attn: Zoning Office

Date Received:	
Approved:	Denied:
Fee: \$25.00 Ch	eck#:

Official Use Only

Mercantile License renewal fee (\$25.00) is due the first business day of each New Year, along with a certificate of insurance.

1.	INITIAL APPLICATION RENEWAL APPLICATION_		CHANGE OF	TENANCY			
2.	Property Address:	, Block_		and Lot			
	P.O. Box no	ot suffici	<u>ent</u>				
3.	Applicant/Business/Trade Name:						
4.	Owner's Mailing Address:						
5.	Owner(s) Phone Number(s): Primary	, Secondary:					
6.	Owner's E-mail Address:						
7.	If Corporation, Name, Address, and Phone Number of all general partners:						
8.	Registered Agent's Name:						
9.	Registered Agent's Address:						
10.							
	E-Mail Address:						
11.	. Number of Bedrooms:Number of AdultsNumber of ChildrenTotal Occupants:						
12.	If fuel oil is used to heat the building and the landlord furnishes the heat in the building, the name and address of the fuel oil dealer servicing the building and the grade of fuel oil used:						
accommounit and square form who	ch rental unit, specification of the exact number of sleeping rooms conditions contained in each sleeping room, identifying each sleeping by square footage thereof. In order to satisfy the requirement of this <b>ootage of each bedroom</b> which shall become a part of the registration filed with the Code Enforcement Officer or his designee.  Description of the exact number of sleeping rooms of the requirement of this contage of each bedroom which shall become a part of the registration filed with the Code Enforcement Officer or his designee.  Description of the exact number of sleeping rooms of the requirement of this part of the requirement of this part of the registration of the re	room spe provision on applic	ecifically by the n, an owner sheation and whi	ne number and location within the rental nall submit a floor plan, indicating the ch shall be attached to the registration			
Print Nar	me						
Owner's	Signature		Date				
There [ar	DO NOT WRITE BELOW LINE, TAX  e/are not] delinquent property taxes or assessments due on above ref taxes/assessments due are paid through	COLLE	CCTOR USE property.	ONLY			
Tax Colle	ector or Designee						

#### Requirements for certificate of insurance

#### Business and Rental Unit Liability Insurance Implementation of P.L. 2022, c. 92

P.L. 2022, c. 92, signed into law on August 5, 2022, institutes a new minimum liability insurance requirement for owners of businesses and rental units (whether residential or non-residential). Such owners will be required to annually register the certificate of insurance in the municipality where the business or rental unit is located.

#### **Minimum Insurance Coverage**

Effective for new insurance policies issued on or after November 3, 2022, the law will require the owner of a business, or one or more rental units, to maintain liability insurance for negligent acts and omissions in an amount of no less than \$500,000 for combined property damage and bodily injury to or death of one or more persons in any one accident or occurrence. Such insurance could be provided as part of policies such as those for commercial general liability, personal liability, or an umbrella insurance policy.



## EAGLESWOOD TOWNSHIP

146 Division St. • West Creek, NJ 08092 (609) 296-3040 • www.eagleswoodtwpnj.us

# State of New Jersey, Department of Community Affairs Landlord Registration

To be filed with the Eagleswood Township Municipal Clerk

Name of the Owner of Premise:				
Address of Premise:				
Block Lot_	Number of Units			
Mailing Address of the owner of th	Premise:			
	thin the county of the rented premises, the name and address must be accept notices from tenants, issue receipts and accept service of process er.			
Name, address and phone # of person	on authorized to accept service on behalf of the owner (if applicable):			
If Partnership- name, address and p	none # of all partners:			
If Corporation- name, address and p	hone # of all corporate officers:			
If Corporation- name, address and	hone # of the Registered Agent:			
Name, address and phone # of the I	Managing Agent:			
Name, address and phone # of the p	erson employed to provide regular maintenance services:			
Name, address and phone # of each	mortgage holder:			
If fuel oil is used to heat the building supplier and the grade of fuel used:	g and provided by the Landlord, the name, address and phone number of the			
Phone #	Fuel Grade			
Signature of Owner	Date			