TOWNSHIP OF ABERDEEN

ONE ABERDEEN SQUARE, ABERDEEN, NJ 07747 PHONE (732) 583-4200 x177 FAX (732) 290-1646 EMAIL: lisa.balletta@aberdeennj.org

ANNUAL REGISTRATION FOR RENTAL DWELLING UNIT

CHANGE OF OCCUPANCY \$150.00 NON REFUNDABLE FEE PAYABLE TO TOWNSHIP OF ABERDEEN

OWNER(S) NAME AND ADDRESS

ADDRESS OF REN	TAL PROPERTY		
BLOCK	LOT	QUALIFER	UNIT #
TENANT(S) NAME	£(S)	OFI I	
TELEPHONE #	IDTH OF FACILI	CELL #	
NAME/DATE OF B	IRTH OF EACH I	DEPENDENT	
CONTACT PERSO	NN		
ADDRESS			
TELEPHONE #		CELL #	
the enforcing Fire I any new occupancy	District and the A . I am also aware in the required co	berdeen Township Ho e that failure to make ertificates of occupanc	
SIGNATURE OF O	WNER/AGENT	-	DATE OF APPLICATION
OFFICE USE:			
REGISTRATION #_	-20		
ISSUE DATE:			
EXPIRATION DAT	E: 1/31/20		
OPEN PERMITS			