



Borough of Merchantville  
1 W Maple Avenue  
Merchantville, NJ 08109

**INVOICE / APPLICATION FOR INSPECTION**

DUE DATE: \_\_\_\_\_ BUILDING ADDRESS: \_\_\_\_\_

BLOCK #: \_\_\_\_\_ LOT #: \_\_\_\_\_ # OF DWELLINGS: \_\_\_\_\_

**A \$150. APPLICATION FEE MUST BE PAID FOR EACH RENTAL UNIT**

**Please type or print all information:** (For additional information, attach separate sheet)

1. Name and Addresses of all record owners of the building or of the rental business including all general partners in case of a partnership) are as follows (name, address, and phone number):

Name: \_\_\_\_\_ Name: \_\_\_\_\_  
Address: \_\_\_\_\_ Address: \_\_\_\_\_  
Phone #: \_\_\_\_\_ Phone #: \_\_\_\_\_  
E-Mail: \_\_\_\_\_ E-Mail: \_\_\_\_\_

2. If the record owner is a corporation, the names and addresses of the registered agent and of the corporate officers are as follows (name, address, and phone number):

Name: \_\_\_\_\_ Name: \_\_\_\_\_  
Address: \_\_\_\_\_ Address: \_\_\_\_\_  
Phone #: \_\_\_\_\_ Phone#: \_\_\_\_\_

**Record owner is not a corporation or**

3. If the address of any record owner is not located in the County in which the dwelling is located, the name of a person who resides in the county and is authorized to accept notices from a tenant to issue receipts for those notices and to accept service of process on behalf of the out of county record of owner(s) are as follows (name, address, and phone number):

Name: \_\_\_\_\_ Name: \_\_\_\_\_  
Address: \_\_\_\_\_ Address: \_\_\_\_\_  
Phone #: \_\_\_\_\_ Phone #: \_\_\_\_\_

**Does not apply**



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4. The managing agent is as follows (names, address and phone number):

Name: \_\_\_\_\_ Name: \_\_\_\_\_

Address: \_\_\_\_\_ Address: \_\_\_\_\_

Phone #: \_\_\_\_\_ Phone #: \_\_\_\_\_

**There is no managing agent**

5. A superintendent, janitor, custodian or other person employed to provide regular maintenance services are as follows: (name, address, including apartment number, dwelling unit, etc. and phone number):

Name: \_\_\_\_\_ Name: \_\_\_\_\_

Address: \_\_\_\_\_ Apt# \_\_\_\_\_ Unit: \_\_\_\_\_ Address \_\_\_\_\_ Apt# \_\_\_\_\_ Unit: \_\_\_\_\_

Phone #: \_\_\_\_\_ Phone#: \_\_\_\_\_

**There is no person employed to provide regular maintenance**

6. The individual representative of the record owner or managing agent who may be reached at any time in the event of any emergency affecting the dwelling or any dwelling unit, including such emergencies as the failure of any essential service of system and who has the authority to make decisions concerning the building, including the making of repairs and expenditures, are as follows (name, address and phone number):

Name: \_\_\_\_\_ Name: \_\_\_\_\_

Address: \_\_\_\_\_ Address: \_\_\_\_\_

Phone #: \_\_\_\_\_ Phone #: \_\_\_\_\_

**Does not apply**

7. The name and address of holders of recorded mortgages on the property are as follows:

Name: \_\_\_\_\_ Address: \_\_\_\_\_

**There is no recorded mortgage on the property**

8. If fuel oil is used to heat the building and the owner furnishes the heat, the name and address of the fuel oil dealer servicing the building and the grade of oil used are as follows (name, address and phone number):

Name: \_\_\_\_\_ Address: \_\_\_\_\_

Phone #: \_\_\_\_\_ Grade of Fuel Oil: \_\_\_\_\_

**Does not apply**

9. The owner of the property is a senior citizen and qualifies under NJSA 54:4-8.41  **Yes**  **No**



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**A SEPARATE FORM AND A \$150.00 FEE FOR EACH UNIT IS REQUIRED**  
(PLEASE REPRODUCE ONE OF THESE PAGES FOR EACH RENTAL UNIT AND ATTACH)

**ADDRESS:** \_\_\_\_\_ **Block#** \_\_\_\_\_ **Lot#** \_\_\_\_\_ **UNIT#** \_\_\_\_\_

9. A floor plan must be submitted.  
The floor plan must show all rooms and include **measurements** of living room and bedrooms, specifically.  
**( X ) YOUR FLOOR PLANS ARE ALREADY ON FILE WITH THE BOROUGH OF MERCHANTVILLE**

10. Name (first and last), phone and unit numbers of all tenants, including children:

First & Last Name: \_\_\_\_\_ First & Last Name: \_\_\_\_\_

Phone #: \_\_\_\_\_ Phone#: \_\_\_\_\_

Children: \_\_\_\_\_ Age: \_\_\_\_\_ Children: \_\_\_\_\_ Age: \_\_\_\_\_

Children: \_\_\_\_\_ Age: \_\_\_\_\_ Children: \_\_\_\_\_ Age: \_\_\_\_\_

Children: \_\_\_\_\_ Age: \_\_\_\_\_ Children: \_\_\_\_\_ Age: \_\_\_\_\_

11. Name of Pet (Cat/Dog): \_\_\_\_\_ Breed of Pet: \_\_\_\_\_

License Number issued to Pet through the Borough of Merchantville: \_\_\_\_\_

12. Chickens must be licensed by the Borough of Merchantville. If you have been approved for chickens, please record

License Number issued for your chicken pen: \_\_\_\_\_

I verify that all information contained herein, is true, correct and complete.

Drivers License Number for the registered owner: \_\_\_\_\_ State \_\_\_\_\_

\_\_\_\_\_  
Signature Printed Name Title Date

*Make checks payable to the Borough of Merchantville. If the forms are not received by the due date, a \$20.00 late fee will be assessed. If you have any questions concerning this form, please call the Office of Rental Inspections at 856-662-2474 x 321.*



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Revised /2016

**CHANGE IN TENANCY INSPECTION**

**A SEPARATE FORM AND A \$50.00 FEE FOR EACH CHANGE IN TENANCY/INSPECTION IS REQUIRED**

(Keep in your file for use in case of "change in tenancy")

(REPRODUCE THIS PAGE FOR EACH CHANGE IN TENANCY AND ATTACH CHECK)

**ADDRESS: \_\_\_\_\_ Block : \_\_\_\_\_ Lot : \_\_\_\_\_ UNIT: # \_\_\_\_\_**

13. Name (first and last), phone and unit numbers of all tenants, including children:

First & Last Name: \_\_\_\_\_ First & Last Name: \_\_\_\_\_

Phone #: \_\_\_\_\_ Phone: \_\_\_\_\_

Children: \_\_\_\_\_ Age: \_\_\_\_\_ Children: \_\_\_\_\_ Age: \_\_\_\_\_

Children: \_\_\_\_\_ Age: \_\_\_\_\_ Children: \_\_\_\_\_ Age: \_\_\_\_\_

Children: \_\_\_\_\_ Age: \_\_\_\_\_ Children: \_\_\_\_\_ Age: \_\_\_\_\_

14. Name of Pet: (Cat/Dog) \_\_\_\_\_ Breed of Pet: (Cat/Dog) \_\_\_\_\_

License # issued to Pet through the Borough of Merchantville: \_\_\_\_\_

15. Chickens must be licensed by the Borough of Merchantville. If you have been approved for chickens, please record

License Number issued for your chicken pen: \_\_\_\_\_

I verify that all information contained herein, is true, correct and complete.

Drivers License Number for the registered owner: \_\_\_\_\_ State \_\_\_\_\_

\_\_\_\_\_  
Signature Printed Name Title Date

Revised /2016