

TOWNSHIP OF WEEHAWKEN - RENT LEVELING BOARD ANNUAL RENT REGISTRATION STATEMENT

For Year **2020** Page _____ of _____

Date Received	12-31-2019	Fee Paid	1000
Late fee Paid		Other	
☐ Complete	☐ Incomplete	☐ 1 st Request	☐ 2 nd Request
Action Taken	BOARD USE ONLY		

Building Address 572 47th St. No. of Residential Units 3

Property Owner: Joseph Michael [Address] [Phone]

Manager: [Name] [Address] [Phone]

Superintendent: [Name] [Address] [Phone]

Owner Occupied Two & Three Family Homes - please answer the following:

Owner Occupied Unit/Apt # (s): _____ Date occupancy began _____ Is this the owner's principal place of residence? ☐ No ☐ Yes
Do the owners residing in the property hold at least a 50% interest in the property? ☐ No ☐ Yes If no, state what interest is held: _____
Has a Certificate of Owner-Occupancy been applied for or granted by the Board? ☐ No ☐ Yes If yes, provide date of application or certificate: _____

A. Please answer each of the following questions completely:

1. Have you ever been granted a hardship increase? ☒ No ☐ Yes. [Date(s) granted _____, percentage/amount _____.]
2. Have you received a Capital Improvement Surcharge since the last registration? If so, list dates: _____
3. Are tenants given storage space other than in their apartment? ☒ No ☐ Yes. Where _____
4. Which appliances are tenants permitted to operate in their apartment. ☒ Dishwasher. ☐ Clothes washer. ☒ Clothes dryer.
5. Which appliances are tenants permitted to operate in any common area. ☐ Clothes washer. ☐ Clothes dryer. ☐ Other _____

B. If this property contains less than six (4) residential units please answer the following.

1. The property ☐ is ☒ is not the subject of any state, county or municipal, building, housing or health code violations. If yes please attach an explanation.
2. I ☐ am ☒ am not aware of any building/property conditions that might result in any building or health code violations. If yes please attach an explanation.
3. I ☐ have ☒ have not received any complaints from any tenants regarding any conditions at the property/building. If yes please attach an explanation.

C. If this property contains five (5) or more residential units please fill out the attached Certification of Substantial Compliance.

I certify that the information and amounts provided by me in this statement are true and that I have posted a copy hereof in a conspicuous area of the building. I further certify that the building and all units are in substantial compliance, as defined in the ordinance, subject however to the information provided herein. I am aware that if any information herein is inaccurate I am required to file a corrected statement forthwith. I am also aware that if any information provided by me is false or misleading I may be subject to punishment and permanent denial of any increases provided for herein.

Signature Joseph Michael Print Name Joseph Michael Title or Relationship to Owner - OWNER - Date _____

***** PLEASE PRINT CLEARLY AND NEATLY OR TYPE *****

Checkbook No. 680388

For Year **2020**

Property Address: 52 47th St. Hipelhausen

* - May only be used if you were granted a hardship or capital improvement increase by the Board. If so please fill in items A1 or A2 on the first page.