

**TOWNSHIP OF TOMS RIVER
33 WASHINGTON STREET
TOMS RIVER, NJ 08753
732-341-1000, EXT 8445
FAX 732-286-3814**

VACANT PROPERTY REGISTRATION FORM

INSTRUCTIONS:

- All vacant properties/buildings must register with the Toms River Township in accordance with Ordinance 4579-18 (Property, Vacant, and Foreclosed).
- Please make checks payable to the **Township of Toms River**. The vacant property registration payment included with this form pertains to the current period of vacancy in which will expire on the last day of the calendar year in which you applied. The property will need to be renewed at the start of the following calendar year if still considered vacant in accordance with Ordinance 4579-18.

Fee Schedule:

Initial Registration: \$1000	Second Renewal: \$3000
First Renewal: \$2000	Subsequent Renewals: \$5000

<u>PURPOSE OF THIS FORM: (Select One):</u>			
<table style="width: 100%; border: none;"> <tr> <td style="width: 33%; padding: 5px;">Initial</td> <td style="width: 33%; padding: 5px;">Renewal</td> <td style="width: 33%; padding: 5px;">Status Change</td> </tr> </table>	Initial	Renewal	Status Change
Initial	Renewal	Status Change	
If this is a status change, please provide reason, and attach any relevant documentation: <hr style="border: 0; border-top: 1px solid black; margin: 5px 0;"/> <hr style="border: 0; border-top: 1px solid black; margin: 5px 0;"/>			

<u>PROPERTY OWNER INFORMATION</u>	
Property Address:	Block: _____ Lot: _____
Owners Name:	
Owners Address:	
Contact Phone #:	Email:
<u>AGENT OF OWNER / PROPERTY MANAGER</u>	
Agent of Owner (Company):	
Agent of Owner (Name of Individual):	
Mailing Address:	
Contact Phone #:	Email:
As an Agent/Property manager of this property are you able to receive legal notice? <input type="checkbox"/> YES <input type="checkbox"/> NO (If NO, fill in the section titled additional contact information the individual authorized to receive legal notice)	

LOCAL PROPERTY MANAGER

Agent of Owner (Company):

Agent of Owner (Name of Individual):

Mailing Address:

Contact Phone #:

Email:

As a local property contact are you able to receive legal notice?

YES NO (If NO, fill in section titled additional contact information the individual authorized to receive legal notice)

ADDITIONAL CONTACT INFORMATION

Name:

Mailing Address:

Contact Phone #:

Email:

PROPER SIGNAGE: IS THERE A SIGN AFFIXED TO THE PROPERTY INDICATING THE NAME, ADDRESS & TELEPHONE NUMBER OF THE OWNER AND OWNER'S AUTHORIZED AGENT? (§473-6B)

YES NO

CERTIFICATION:

I, _____ hereby request to register the vacant property/building listed above and acknowledge that the information above is complete and accurate. In accordance with Ordinance 4579-18 of Toms River Township, I agree to notify any future owner of this vacant building registration. I certify that the foregoing statements made by me are true. I am aware that if any of the foregoing statements made by me are willfully false, I am subject to punishment.

Applicant's Name (Printed)

Date

Applicant's Signature

State of _____ County of _____

I, _____, a Notary Public, do hereby certify that on this _____ day of _____, 20____, personally appeared before me _____, known to me to be the person whose name is subscribed to the foregoing instrument, and swore and acknowledged to me that he executed the same for the purpose and in the capacity therein expressed, and that the statements contained therein are true and correct.

In witness whereof, I hereunto set my hand. _____

Notary Public:

My commission expires: