



Borough of North Plainfield
263 Somerset Street
North Plainfield, New Jersey 07060
(908) 769-2900 ext. 2917 or 2915
Fax (908) 769-6499

VACANT / ABANDONED PROPERTY REGISTRATION FORM (Please Print or Type)

Property Address: _____ Block _____ Lot _____

PROPERTY OWNER:

Name: _____

Address (No P.O.Boxes): _____

Telephone Number & E-mail: _____

LENDER/LIEN HOLDER/MORTGAGE COMPANY/TRUSTEE:

Name: _____

Address (No P.O. Boxes): _____

Telephone AND Fax Numbers: _____

Contact Name, Telephone Number (Direct Line) & E-mail: _____

PROPERTY MANAGEMENT COMPANY:

Name: _____

Address (No P.O. Boxes): _____

Telephone AND Fax Numbers: _____

Contact Name, Telephone Number (Direct Line) & E-mail: _____

PROPERTY DESCRIPTION

Total Number of Residential Units: _____ Number of Stories: _____ Property Acquirement Date: _____

1. Is the property: Vacant _____ Abandoned _____ Secure _____ Open & Accessible _____

2. Does the owner intend to restore the property to productive use and occupancy within the next 12 months? Yes: _____ No: _____

3. Is the property currently enclosed and/or secured from unauthorized entry (e.g., windows/doors boarded)? Yes: _____ No: _____

4. Are the utilities ON or OFF?: Electric _____ Water _____ Gas _____

5. Is a sign (minimum 8"x10") affixed to the building specifying the name, address and telephone number of the owner, owner's authorized agent and person responsible for daily supervision and management of the building? Yes: _____ No: _____

An emergency contact person, having the authority to act and respond to the needs of the registered property, must be available on a 24 hour per day, 7 day per week basis. Emergency Contact Name & 24 Hour Telephone number _____

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 UNDER THE PENAL SECTION OF THE BOROUGH OF NORTH PLAINFIELD PROPERTY MAINTENANCE ORDINANCE.

OWNER'S NAME (PRINTED)

OWNER'S SIGNATURE

DATE

OFFICE USE ONLY: Initial \$500 _____ First \$1500 _____ Second \$3000 _____ Subsequent \$5000 _____
Date Paid: _____ Cash _____ Check _____ Check Number _____