



Township of Raritan

Township Clerk, 1 Municipal Drive, Flemington, NJ 08822

Ph: (908) 806-6100 Fax: (908) 806-7061

<u>FOR TOWNSHIP USE ONLY</u>
DATE REC'D: _____
REG. NO.: _____

USE PAGE 1 FOR REGISTERING A VACANT PROPERTY. USE PAGE 2 FOR REGISTERING A PROPERTY FOR WHICH A SUMMONS AND COMPLAINT IN A FORECLOSURE ACTION ON RESIDENTIAL PROPERTY HAS BEEN SERVED

VACANT PROPERTY REGISTRATION FORM

Please file this form and the \$50.00 registration fee required for vacant properties with the Township Clerk. A copy must also be provided to the Township Planning and Zoning Office (Ph: 908-806-6105 Fax: 908-806-8031). Please make check payable to: *Raritan Township*

Property Address: _____
Street Address
City
Zip Code

Block: _____ Lot: _____ Qualifier: _____

Status: (check all that apply): _____ Vacant _____ Occupied _____ REO _____ Lis Pendens _____ In Foreclosure

Date: _____
Property became vacant
Current owner acquired title to property

Property Owner Name: _____

Property Owner Mailing Address: _____

Contact Person for Property Owner: _____

Phone: _____ Fax: _____

Email: _____

Designated Property Manager (Must maintain office in New Jersey or reside in New Jersey per Twp. Code)

Property Management Company: _____ Phone: _____

New Jersey address: _____
Street Address
City
Zip Code

Property Mgr. Contact Person Name: _____ Phone: _____

Fax: _____ Email: _____

24-hour Emergency Contact Person: _____
(Must have office or reside in NJ & have the authority to act on behalf of the property owner or property mgr. per Twp. Code)

Contact Information: Phone: _____ Fax: _____

Email: _____



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IN-FORECLOSURE PROPERTY REGISTRATION FORM

Please file this form with the Township Clerk to register a property for which a Summons and Complain in a foreclosure action on a residential property in Raritan Township has been served. A copy must also be provided to the Township Planning and Zoning Office
Ph: 908-806-6105 Fax: 908-806-8031.

Property Address: _____

Street Address

City

Zip Code

Block: _____ Lot: _____ Qualifier: _____

Status: (check all that apply): _____ Vacant _____ Occupied _____ REO _____ Lis Pendens _____ In Foreclosure

Date Summons and Complaint in a foreclosure action was served: _____

Property Owner Name: _____

Name of Creditor: _____

Name and address of entity designated to accept notices on behalf of Creditor in this matter:

Name: _____ Address: _____

City: _____ State: _____ Zip Code: _____ Phone: _____

Fax: _____ Email: _____

Is this housing unit an Affordable Housing Unit pursuant to the "Fair Housing Act?" Y N

Property Management Company: _____ Phone: _____

New Jersey address: _____

Street Address

City

Zip Code

Property Mgr. Contact Person Name: _____ Phone: _____

Fax: _____ Email: _____

24-hour Emergency Contact Person: _____

(Must have office or reside in NJ & have the authority to act on behalf of the property owner or property mgr. per Twp. Code)

Contact Information: Phone: _____ Fax: _____

Email: _____