



# CITY OF TRENTON

Department of Housing & Economic Development

## Vacant Property Registration Application

As the owner of a vacant building in the City of Trenton, **effective January 1, 2015**, you are required pursuant to Ordinance 14-54 to register your building and pay an initial registration fee of \$250. The \$250 fee **must** accompany the application. At this time, the only accepted forms of payment are check and money order. Make checks payable to **City of Trenton**, and mail to **Department of Housing & Economic Development, Division of Real Estate & Property Management, Attn: Vacant Property Registration, 319 East State Street, Trenton, New Jersey 08608**. Complete **all** information requested below where applicable. **FIELDS MARKED BY AN ASTERISK (\*) ARE MANDATORY. ALL INFORMATION PROVIDED IS STRICTLY CONFIDENTIAL.** Owners must notify the Director of the Division of Real Estate & Property Management within 30 days of any change in the registration information by filing an amended registration statement (below). The Owner(s) shall be required to renew the registration annually as long as the building remains vacant.

Address of Property: \_\_\_\_\_

Date of Vacancy: \_\_\_\_/\_\_\_\_/\_\_\_\_ (mm/dd/yyyy)

1. \*Owner's Name#1 \_\_\_\_\_  
\*Social Security # \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Date of Birth \_\_\_\_/\_\_\_\_/\_\_\_\_ (mm/dd/yyyy)  
\*Home Address \_\_\_\_\_  
\*Daytime Phone # ( ) \_\_\_\_\_ Night Phone # ( ) \_\_\_\_\_ Cell # ( ) \_\_\_\_\_  
\*Email Address \_\_\_\_\_

2. Owner's Name #2 \_\_\_\_\_  
Social Security # \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Date of Birth / / (mm/dd/yyyy)  
Home Address \_\_\_\_\_  
Daytime Phone # ( ) \_\_\_\_\_ Night Phone # ( ) \_\_\_\_\_ Cell # ( ) \_\_\_\_\_  
Email Address \_\_\_\_\_

3. Agent's or Rep's Name \_\_\_\_\_  
Home Address \_\_\_\_\_  
Daytime Phone # ( ) \_\_\_\_\_ Night Phone # ( ) \_\_\_\_\_ Cell # ( ) \_\_\_\_\_  
Email Address \_\_\_\_\_

4. Corporation's Name \_\_\_\_\_  
(if applicable)  
Principal Owner's Name \_\_\_\_\_  
Home Address \_\_\_\_\_  
Daytime Phone # ( ) \_\_\_\_\_ Night Phone # ( ) \_\_\_\_\_ Cell # ( ) \_\_\_\_\_  
Email Address \_\_\_\_\_

**I HEREBY ATTEST/SWEAR THAT THE INFORMATION CONTAINED HEREIN IS ACCURATE AND COMPLETE TO THE BEST OF MY KNOWLEDGE.**

PRINCIPAL OWNER'S SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

**Official Use Only** Date Received \_\_\_\_/\_\_\_\_/\_\_\_\_ Submitted by \_\_\_\_\_ Total fee received \$ \_\_\_\_\_