



BOROUGH of
**PEAPACK &
GLADSTONE**

www.peapackgladstone.org

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Sarah Jane Noll Zoning Official and Rental Official

Rental Registration Form - 2026

Type of Registration: Initial Application ____ Annual/Renewal ____

Type of Rental: Single Family ____ multi-Family ____ Other
(Specify) _____

Name of Property (if any): _____

Block: ____ **Lot:** ____ **Street Address:** _____

Total number of rental units at the property: _____

State Law Requires that all buildings containing three (3) or more units must be registered with the State Department of Community Affairs.

STATE DCA REGISTRATION NUMBER: _____

Owner/Landlord Information

Owner's Name (taxpayer): _____ **E-mail:** _____

Owner is: Individual ____ Partnership ____ LLC Corporation ____ Other ____

Owner Address: _____ **City:** _____ **State:** _____ **Zip:** _____

Registered Agent: _____ **E-mail:** _____

(Email address must be provided.)

Home Phone: _____ **Office:** _____ **Cell:** _____

Property Maintenance Company – *If there is a property maintenance manager or company, please provide their information here:*

Name of Firm (if applicable): _____

Contact Name: _____ **Address:** _____

E-Mail: _____ **Cell:** _____

Heating Source (check one that applied): Oil ____ Gas ____ Elec. ____

Other (explain) _____

Name of Oil Company: _____ **Address:** _____

Telephone #: _____ **E-mail:** _____

