



**TOWN OF CLINTON**  
INCORPORATED APRIL 5, 1865  
43 Leigh St., P.O. Box 5194  
Clinton, N.J. 08809-5194  
(908) 735-8616 FAX (908) 735-8082

**APPLICATION FOR RENTAL CERTIFICATE OF OCCUPANCY  
DUE TO A CHANGE IN TENANTS**

This application should be completed in full whenever there is a change in any tenant of a rental dwelling unit. An application fee of \$25.00 is also required when submitting this application.

1. NAME OF LANDLORD:
  
2. ADDRESS OF LANDLORD:
  
3. CONTACT TELEPHONE NUMBER OF LANDLORD (for inspection scheduling purposes):
  
4. PHYSICAL ADDRESS OF DWELLING UNIT (Include Dwelling Unit Number):
  
5. CHANGE IN OCCUPANCY DATE:
  
6. TOTAL NUMBER OF TENANTS TO OCCUPY THIS DWELLING UNIT (Including Minors):
  
7. TOTAL GROSS FLOOR AREA OF ALL HABITABLE ROOMS WITHIN DWELLING UNIT:
  
8. FLOOR AREA OF EACH ROOM WITHIN DWELLING UNIT USED FOR SLEEPING PURPOSES:
  - a. Room 1:
  - b. Room 2:
  - c. Room 3:
  - d. Room 4:
  - e. Room 5:
  - f. Room 6:

Date Fee Collected: \_\_\_\_\_ Amount Paid: \$25.00 Check #: \_\_\_\_\_



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**CERTIFICATION OF LANDLORD**

I hereby certify that the above listed dwelling unit is in compliance with the applicable sections of the International Property Maintenance Code, Ordinance 05-12 and all applicable laws and regulations.

I hereby also certify that the above listed dwelling unit complies with Chapter 70 of the Code of the Town of Clinton.

I hereby certify that I will not authorize or permit more than the maximum permitted number of tenants to occupy the dwelling unit.

I hereby state and certify that the foregoing statements made by me are true and accurate. I am aware that if any of the foregoing statements made by me are willfully false, I am subject to punishment.

By \_\_\_\_\_  
[Name of Landlord]

Signed and sworn to before me on this day \_\_\_\_\_, 200

Notary Public \_\_\_\_\_