

TOWNSHIP OF SHREWSBURY

**TENANT REGISTRATION FOR MULTIPLE DWELLINGS
VACANCY DECONTROL APPLICATION**

PLEASE INDICATE THE FOLLOWING:

Date: _____

Real Property Address _____

Name of Complex and Unit Number _____

Block _____ Lot _____

Owner's Names _____

Owner's Telephone # _____

Owner's Address _____

Supervisor's Name _____

Supervisor's Telephone # _____

Previous Tenant _____

Amount of Rent _____

New Tenant _____

Amount of Rent _____

Number of Bedrooms _____

Please return to the following address:

Township of Shrewsbury

c/o Rent Leveling Board

1979 Crawford Street

Shrewsbury Township, NJ 07724