



DEPARTMENT OF PROPERTY MAINTENANCE

RENT CONTROL BOARD

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www.eastorange-nj.gov

Mark Barner
Director

MAYOR, Ted R. Green

Mike Galloway
Chairperson

Wanda Watson
Rent Regulation Officer

Cheryl Crawford
Vice Chairperson

RENTAL INCREASE APPLICATION

The landlord shall have a registered rent roll filed with the Department of Property Maintenance/Rent Control Office to qualify for any rental increase.

TENANT'S NAME _____

BUILDING ADDRESS _____ UNIT # _____

Have you notified the tenant in writing that you (the landlord) have complied fully with Chapter §218-14 and the itemized rent roll can be viewed in the Property Maintenance/Rent Control Office? Yes _____ No _____

(Pursuant to §218-10 Establishment of rents increases for current tenants; No rental increase of any amount or percent shall be demanded, received or accepted, however, unless the landlord has complied fully with the provisions of §218-14 of this chapter. In the event that a landlord fails to have a current rent roll on file in accordance with the provisions of §218-14 of this chapter at the time he demands a rental increase from a tenant, he shall be precluded from obtaining any increase from said tenant or tenants objecting to said proposed increase for a period of 12 months from the date the proposed increase was to take effect).

DATE OF TENANT'S NOTIFICATION OF INCREASE _____

DATE OF LAST RENT INCREASE _____ EFFECTIVE DATE OF NEW INCREASE _____

PERCENTAGE AMOUNT OF INCREASE _____ % DOLLAR AMOUNT OF NEW INCREASE \$ _____

CURRENT MONTHLY RENT \$ _____ PROPOSED RENT \$ _____

PROPERTY OWNER'S INFORMATION

Name _____

ADDRESS _____

TELEPHONE NUMBER _____ EMAIL _____

MANAGEMENT COMPANY

Name _____

ADDRESS _____

TELEPHONE NUMBER _____ EMAIL _____

PROPERTY MANAGER NAME _____ TELEPHONE NUMBER _____

SUPERINTENDENT NAME _____ TELEPHONE NUMBER _____

SIGNATURE _____ TITLE _____

PRINT NAME _____ DATE _____

Note: All sections of this form must be filled out completely. The City will not process any application until the landlord; 1) submits the completed application; 2) pays the non-refundable application fee; 3) delivers the Notice to Quit, under §218-12 Notice Requirements for Rental Increases; to the City Rent Control Office. The non-refundable application fee shall be an amount equal to five dollars (\$5) multiplied by each unit owner or their agent seeking an increase.

ALL FEES MUST BE PAID BY CERTIFIED CHECK, MONEY ORDER ONLY OR CREDIT CARD

OFFICE USE ONLY:

ANNUAL INCREASE RECORDED? YES ___ NO ___ FEE OF \$ _____ RECORDED YES ___ NO ___

COLLECTED BY _____ RECEIPT# _____ DATE _____

RENTAL INCREASE APPLICATION

§218-10 ESTABLISHMENT OF RENT INCREASES FOR CURRENT TENANTS

Last Name	First Name	*Senior/ Disabled Persons (Yes-No)	Unit #	Unit Type # of Rooms	Current Rent Amount	Percent of New Increase	New Monthly Rent Amount	Current Parking / Garage	New Parking / Garage	Date of Last Increase	Effective Date New Increase

*For a qualified senior/disabled tenant(s), said landlord, owner or agent of the same shall not seek or demand an increase in rent which exceeds 2% of the rent charged during the preceding twelve (12) month period. In apartments that contain multiple persons, the 2% cap shall only apply if a senior/disabled qualified tenant is identified on the lease as a tenant in the subject apartment. The allowable annual increase shall not be permitted, if the dwelling is not in substantial compliance and/or if the landlord has not met the registration requirements as specified in §218-14 Filing and updating of list of rents.

ATTACH THIS FORM TO PAGE 1 OF RENTAL INCREASE APPLICATION

(FEEL FREE TO COPY PAGE)