

INSPECTION DATE AND TIME: _____

TOWNSHIP OF RIVERSIDE
P.O. BOX 188
RIVERSIDE, NJ 08075

APPLICATION FOR RESALE/APPLICATION FOR CHANGE IN TENANT(MULTI-UNIT)

DATE: _____ FILE #: _____ FEE: \$100.00 PER UNIT

1. APPLICATION FOR:

RESALE: _____ CHANGE IN TENANT: _____

2. NAME OF APPLICANT: _____

3. ADDRESS (MAILING): _____

4. ADDRESS (PROPERTY): _____

5. BLOCK: _____ LOT: _____ NUMBER OF UNITS: _____

6. PHONE: _____ FAX: _____ EMAIL: _____

7. RESALE INFORMATION:

SETTLEMENT DATE: _____ SETTLEMENT TIME: _____

AGENT/REALTOR NAME: _____

AGENT/REALTOR CONTACT INFORMATION: _____

COMMERCIAL TENANT (IF APPLICABLE): _____

IS THIS A RENTAL PROPERTY: _____ IF YES, IS IT REGISTERED: _____

8. CHANGE IN TENANT INFORMATION:

NUMBER OF TENANTS: _____ DATE OF LAST INSPECTION: _____