



Borough of Seaside Park

CODE ENFORCEMENT OFFICE

732-250-7569
Fax 732-375-3058

The Family Resort

313 SW Central Ave. • Seaside Park, New Jersey 08752

2024 RENTAL APPLICATION

PLEASE PRINT CLEARLY: Administrative staff will contact you via email/phone to schedule/confirm your inspection date.

Rental Property Address: _____ **BLOCK** _____ **LOT** _____

Owner Name: _____ Owner Phone Number: _____

Home Mailing Address: _____
Owner Email: _____

If using a Licensed Rental Agent: Name _____ Phone _____ Email _____

SCHEDULING: Inspections are completed Monday through Friday, as well as the following Saturdays (with limited space available), Feb. 24, Mar. 23, Apr. 13 & 20 and, May 11 & 18, between the hours of 9:00 AM & 12:00 noon & as well as between 1:00 PM & 3:00 PM. It is the responsibility of the **PROPERTY OWNER** to schedule the required inspection and, if necessary, to arrange with the tenant or rental agent for access. Must be scheduled **at least 2 weeks** in advance.

SEASONAL (SUMMER) RENTAL – APRIL 13, 2024-OCTOBER 12, 2024:

Applications submitted by and property inspected by:

Date	Fee
On or before May 1, 2024	\$100.00 per unit
May 2, 2023-May 31, 2024	\$150.00 per unit
After June 1, 2024	\$200.00 per unit

If re-inspection necessary: \$50 fee required prior to re-inspection.

ANNUAL (YEARLY) RENTAL -JANUARY 1, 2024-DECEMBER 31, 2024

Applications submitted by and property inspected by:

Date	Fee
On or before March 1, 2024	\$100.00 per unit
March 2, 2023-March 31, 2024	\$150.00 per unit
After April 1, 2024	\$200.00 per unit

If re-inspection necessary: \$50 fee required prior to re-inspection.

Requested Date for Inspection: _____ AM / PM (circle one) We will confirm date via email/phone.

ANNUAL (year-round) _____ **SEASONAL** (April through October) _____ **Number of units:** _____

PLEASE CHECK IF THE ABOVE PROPERTY WILL NOT BE RENTED IN 2024 AND RETURN to this office _____

APPLICANT CERTIFICATION: I certify that the above statements and information on this application are true.

_____ Applicant is the Property Owner _____ Applicant is Licensed Rental Agent/Authorized Agent

Signature _____ **Date** _____

FOR OFFICE USE ONLY:

CONFIRMATION: EMAIL DATE _____ CALL DATE _____

Fee Paid \$ _____ Date Received _____ Received by: _____ Cash [] Check # _____

Current/Up to date - Taxes _____ Current/Up to date Water/Sewer _____ E _____ J _____ S _____ G _____ A _____

Liability Insurance Certificate _____ Lead Inspection Needed _____ Landlord Registration _____

Number of rental units: _____

Location Rental status of unit

___ Front ___ Not Rented
 Unit 1 ___ Rear ___ Summer Only
 ___ Upper ___ Rented Annually
 ___ Lower

___ Front ___ Not Rented
 Unit 2 ___ Rear ___ Summer Only
 ___ Upper ___ Rented Annually
 ___ Lower

___ Front ___ Not Rented
 Unit 3 ___ Rear ___ Summer Only
 ___ Upper ___ Rented Annually
 ___ Lower

___ Front ___ Not Rented
 Unit 4 ___ Rear ___ Summer Only
 ___ Upper ___ Rented Annually
 ___ Lower

___ Front ___ Not Rented
 Unit 5 ___ Rear ___ Summer Only
 ___ Upper ___ Rented Annually
 ___ Lower

___ Front ___ Not Rented
 Unit 6 ___ Rear ___ Summer Only
 ___ Upper ___ Rented
 Annually
 ___ Lower

BR 1	BR 2	BR 3	TOTAL	OCCUPANCY	STICKER POSTED []
					HEAT TYPE
BR 4	BR 5	LR			
				DATE	PERMIT #
BR 1	BR 2	BR 3	TOTAL	OCCUPANCY	STICKER POSTED []
					HEAT TYPE
BR 4	BR 5	LR			
				DATE	PERMIT #
BR 1	BR 2	BR 3	TOTAL	OCCUPANCY	STICKER POSTED []
					HEAT TYPE
BR 4	BR 5	LR			
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					HEAT TYPE
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BR 4	BR 5	LR			
				DATE	PERMIT #