

Township of Edison
DECONTROLLED UNIT REGISTRATION FORM

Year

NAME OF MULTIPLE DWELLING

Building No.	Apt. No. Address	Date Vacated	Date Re-Rented	Decontrolled Rental

CERTIFICATION

I certify that information contained in this form is true. I further certify that the vacancies set forth on this form were accomplished by voluntary choice of the former tenant, by legal process of law or by willful abandonment. The vacancy was not introduced by harassment or annoyance by the landlord.

I certify that the foregoing statements made by me are true. I am aware that if any statement contained herein is willfully false, that I am subject to punishment.

Date

Signature