



FRANKFORD Township

Date Paid: _____
Check # _____
Amount \$ _____

151 US Hwy. 206, Augusta New Jersey 07822 * Phone: 973-948-7592 * Fax: 973-948-0943
 Website: www.frankfordtownship.org E-mail: zoning@frankfordtwp-nj.com

**REGISTRATION FORM
 VACANT/ABANDONED RESIDENTIAL PROPERTIES
 (Please Print Legibly or Type)**

The Township of Frankford requires owners of Vacant and Abandoned Properties under Section: 13-5 to register with our Code Enforcement Department and has established a registration fee and must also comply with the Property Maintenance Code 13-1.

*Effective September 8, 2015, Ordinance 13-5 requires the owner of any vacant and abandoned property to register within (30) thirty calendar days after the building becomes Vacant and Abandoned or within thirty (30) days after assuming ownership of the Vacant and Abandoned property, whichever is later; or within (10) calendar days of receipt of notice from the Township. The registration shall remain valid for (1-year) from the date of registration (except for the initial registration which shall be valid through December 31st of the year in which it was filed). **An annual renewal each year is required as long as the property remains vacant and abandoned.***

<input type="checkbox"/> Initial Registration Fee \$500.00	<input type="checkbox"/> First annual fee \$1,500	<input type="checkbox"/> Second annual fee \$3,000.00
<input type="checkbox"/> Beyond Second Renewal \$5,000.00		

- The owner shall notify the municipal clerk within thirty (30) days of any change in the registration information by filing an amended registration.
- The registration statement shall be deemed prima facie proof of the statement therein contained in any administrative enforcement proceeding or court proceeding instituted by the Township again the Creditor.
- New Jersey based Property Manager, Property Maintenance company required.

PROPERTY ADDRESS: _____ **Blk:** _____ **Lot:** _____

1. **Owners Name:** _____ **Address:** _____
 City: _____, State: _____, Zip: _____ Phone # _____

2. **Property Maintenance Co. (NJ REQUIRED ONLY)** _____
 Agent Name: _____ Address: _____ City: _____
 State: _____, Zip Code: _____ Ph# _____, Valid Email: _____

3. **Financial/Bank/Lender:** _____
 City: _____, State: _____, Zip Code: _____
 Phone # _____, Valid Email: _____

Date of Vacancy _____ **Date of Foreclosure:** _____

I Hereby Attest/Swear that the information on this registration is accurate and complete to the best of my knowledge.

Principal Owners Signature: _____, Date: _____