



CITY OF OCEAN CITY

Department of Community Development
Division of Municipal Code Enforcement

MUNICIPAL ORDINANCE 5-2

ID # _____

PROPERTY REGISTRATION FORM

Block: _____ **Lot:** _____ **Qualifier:** _____ **Construction Date:** _____

Address of Property: _____

Owner: _____

Address of Owner: _____

City: _____ **State:** _____ **Zip Code:** _____

Property Phone # (Ocean City) : _____

Owner Home Phone #: () _____

EMERGENCY CONTACT INFORMATION

LOCAL CONTACT: _____

REAL ESTATE AGENT, PLUMBER, NEIGHBOR, ETC.

ADDRESS: _____

PHONE NUMBER: _____

PLEASE CIRCLE THOSE THAT APPLY AND ENCLOSE A **SEPARATE CHECK** MADE PAYABLE TO : **City of Ocean City**, FOR THE CORRECT AMOUNT.

RESIDENTIAL:

ONE RENTAL UNIT.....\$125.00

TWO RENTAL UNITS.....\$250.00

NOTE: MORE THAN TWO RENTAL UNITS, CONTACT THIS OFFICE @ 609-525-9444 ext 1 413

COMMERCIAL OR STORE FRONT (NOT RESIDENTIAL)

ONE LEASED UNIT.....\$30.00

TWO LEASED UNITS.....\$60.00

THREE TO FIVE LEASED UNITS.....\$125.00

EACH ADDITIONAL UNIT..... \$ 5.00

SIGNATURE: _____

I HEREBY CERTIFY THAT I DO NOT RENT MY PROPERTY, NOR DO I WISH TO VOLUNTARILY REGISTER ANY EMERGENCY CONTACT INFORMATION.

SIGNATURE: _____

QUESTIONS: *Tom Cox, License Inspector*
Municipal Code Enforcement
1501 West Avenue
Ocean City, NJ 08226
609-525-9444 ext 413