

EWING TOWNSHIP CODE ENFORCEMENT

1666 PENNINGTON RD., EWING, NJ 08618, REAR OF BUILDING (609) 883-2900 Ext 7677

2025 ANNUAL FIRE REGISTRATION FOR NON-OWNER OCCUPIED RESIDENTIAL RENTAL PROPERTIES

IN ACCORDANCE WITH THE 2018 International Property Maintenance Code the annual inspection shall be enforced in all non-owner-occupied single-family dwellings.

Enclosed is your notice for the Annual Fire Registration, as required the Ewing Township Ordinance # 05-21, the establishment of the Fire Inspection program is mandatory, and registrations, renewals and inspections will be conducted on an annual basis. Failure to register will result in a fine double the registration fee.

YOU MUST ALSO SCHEDULE YOUR ANNUAL FIRE PREVENTION INSPECTION !!!!

**NOTE: ALL REGISTRATIONS & FEES NOT SUBMITTED AND PAID BY January 31, 2025.
WILL RESULT IN THE ISSUANCE OF A VIOLATION AND FINES IMPOSED.**

Please complete the attached application forms and return them to the Ewing Township Code Enforcement/Fire Prevention Division, at the above address, along with a check or money order for the appropriate fee amount.

PLEASE NOTE YOUR TOTAL SQUARE FOOTAGE OF LIVING SPACE AND MARK THE APPROPRIATE FEE:

YOUR SQ FT IS _____ FEE \$ _____

This year's fee schedule, as adopted by ordinance no. 05-21, is based on the square footage of this business premises, as follows:

0 - 1,000 sq ft	\$ 50.00
1,001 - 5,000 sq ft	\$ 100.00
5,001 - 15,000 sq ft	\$ 135.00

**Note: IF THE REGISTRATION FEE IS NOT PAID BY THE
DATE SPECIFIED, PENALTIES WILL BE CHARGED, AS
TO DOUBLE THE REGISTRATION FEE.**

You must submit the appropriate fee, along with the completed application. Please make checks payable to the Township of Ewing.

**TOWNSHIP OF EWING
NON-OWNER OCCUPIED
RENTAL PROPERTY
2025**

Owner's Name: _____

Rental Address: _____

Telephone #: _____ BLK- _____ LOT _____

Email Address- _____

OWNERSHIP INFORMATION

1. **Name of Landlord:** _____

2. **Address of Landlord:** _____

3. **Phone # of Landlord:** _____

NAMES OF ALL TENANTS RESIDING IN THE PROPERTY:

1. _____
2. _____
3. _____
4. _____
5. _____
6. _____
7. _____
8. _____
9. _____
10. _____

TOTAL SQUARE FOOTAGE OF LIVING SPACE _____

******* (PLEASE ATTACH A FLOOR PLAN OF YOUR INTERIOR
PROPERTY WITH MEASUREMENTS) *******

Alarm Information

Is the property alarmed? Yes / No **Type of alarm system:** Burglar _____ Fire _____ Other _____ (Specify)

Name & Address of alarm service company: _____

Alarm company telephone number: _____

EMERGENCY INFORMATION

This information will be kept on file with the Police Dispatcher and the Code Enforcement Office in the event of a problem at your rental property after hours. Please list at least two names, preferably those with keys and close enough to come out if needed by police or fire officials.

NAME _____	TELEPHONE # _____
NAME _____	TELEPHONE # _____
NAME _____	TELEPHONE # _____

**** FOR OFFICE USE ONLY ****

CASH _____ CHECK# _____ CREDIT CARD _____ AMOUNT _____

DATE _____

RECEIVED BY _____