



EWING TOWNSHIP CODE ENFORCEMENT OFFICE

2 JAKE GARZIO DRIVE, EWING, NJ 08628 (609) 883-2900 Ext 7677 FAX (609) 406-1384

Registration #- _____

Application Date: _____

VACANT BUILDING REGISTRATION

Vacant Building Address: _____ Case I.D.# _____

Owner(s):

Full Name (PRINT) _____

Company Name: _____

Street Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Cell: _____

Email Address: _____

24 Hr. Emergency # _____

Attach sheets if necessary

**Lienholder in Possession (s) or Others w/
Legal Interest in Property:**

Full Name (PRINT) _____

Company Name: _____

Street Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Cell: _____

Email Address: _____

24 Hr. Emergency # _____

Attach sheets if necessary

Authorized Agent:

Full Name (PRINT) _____

Company Name: _____

Street Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Cell: _____

Email Address: _____

24 Hr. Emergency # _____

Can be a Realtor, leasing agent, management company,
mortgagor or other party with direct or indirect control or
authority over the building.

Date Building became Vacant: _____ Property Plan on Reverse side

Acknowledgement of Responsibility: The Undersigned owner/agent: 1) avows and acknowledges that the information that the information herein is complete and accurate; 2) assumes responsibility for maintaining and securing the subject building in conformity with Ewing Township Codes and 3) acknowledges the responsibility to notify the township in writing within 30 days of any changes to information contained in this registration form.

Owner or Agent: _____ Signature: _____ Date: _____
Please Print Name

FOR OFFICIAL USE ONLY

Initial Registration \$250.00

First Renewal \$500.00

Subsequent Renewal \$1,000.00

After 5 years Registration Fee \$5,000.00

Submitted Property Plan on: _____

Registration Issued on: _____

FEE MUST ACCOMPANY APPLICATION

Make checks payable to: Township of Ewing
Mail to: Ewing Township
Attention: Code Enforcement
2 Jake Garzio Drive
Ewing, NJ 08628

VACANT PROPERTY-MAINTENANCE PLAN

- 1.) The owner of owner's agent shall perform regular monthly inspections of the property to assure compliance with the requirements of this section.
- 2.) Utilities must be properly disconnected while vacant.
- 3.) All doors, windows and other openings shall be secured
- 4.) Weeds shall be removed from landscape beds, the perimeter of buildings, along fence lines, and in parking lot joints & cracks.
- 5.) Grass height shall be maintained no higher than 10 inches and the trimmings removed from the property.
- 6.) Exterior properties shall be kept free of junk & debris, including, but not limited to, newspapers, flyers, circulars, furniture, appliances, containers, equipment, auto parts, garbage, clothing, inoperable vehicles, boats, campers, or any other items that give the appearance that the property is vacant.
- 7.) Building appurtenances must be securely attached so as not to cause blighting condition, including, but not limited to, gutters, downspouts, shutters, railings, guards, steps, awnings, canopies, signs, light fixtures, and fire escapes.
- 8.) Detached signs and lighting systems shall be structurally sound, and maintained so as not to cause a blighting conditions, or removed.
- 9.) Property fencing and retaining walls shall be maintained structurally sound. Any fence or wall with broken or hanging components shall be repaired, straightened, or removed.
- 10.) Pools, spas, and ponds shall be drained and kept dry or kept in working order so that the water remains clear and free of pollutants and debris. Pools and spas must comply with the barrier requirements of the adopted Building Code.
- 11.) The property shall be free of graffiti or similar markings by removal or painting over with a color that matches the exterior of the structure.
- 12.) Perishables shall be removed from the interior of the structures.

I certify that the above Vacant Property Maintenance Plan will be adhered to and that I am required to notify the Division of Housing Code Enforcement of any changes.

Signature of Owner

Date

FOR OFFICE USE ONLY

CASH _____ CHECK _____ CHECK # _____ AMOUNT PAID _____ STAFF INITIALS _____ DATE _____

CREDIT CARD _____ EXP. DATE _____ AMOUNT PAID _____ STAFF INITIALS _____ DATE _____