MULTIPLE DWELLING REPORTING RULE  
New Property/Change of Owner and/or Agent Address Form

It is mandatory to complete this form if the property has been sold, or if the owner or owner's agent has a new mailing address, or if the property was converted into a condominium with less than 25 rental units. Please complete the owner/agent information below and return this form to the Division on Civil Right, Multiple Dwelling Unit, PO Box 089, 140 E. Front St., 6th Fl., Trenton, New Jersey 08625-0089 or email to dcrmdrr@njcivilrights.gov.

Complex Code: __________________________  County: _______________________________________________________
Block No.: __________________________ Lot No.: __________________________ No. of Units: __________________
Complex Name: _______________________________________________________________________________________
Complex Address 1: _____________________________________________________________________________________
Complex Address 2: _____________________________________________________________________________________
City, State, Zip: ______________________________________________________________________________________
Date of Sale/Change: __________________________  Completion Date of New Property: ___________________________
If the property was converted into a condominium with less than 25 rental units, please provide the date of conversation: ________________________________

Prior Owner/Address
______________________________________________   ____________________________________________
______________________________________________   ____________________________________________
______________________________________________   ____________________________________________
______________________________________________   ____________________________________________

Prior Agent/Address
______________________________________________   ____________________________________________
______________________________________________   ____________________________________________
______________________________________________   ____________________________________________
______________________________________________   ____________________________________________

Current Owner/Address
______________________________________________   ____________________________________________
______________________________________________   ____________________________________________
______________________________________________   ____________________________________________
______________________________________________   ____________________________________________

Current Agent/Address
______________________________________________   ____________________________________________
______________________________________________   ____________________________________________
______________________________________________   ____________________________________________
______________________________________________   ____________________________________________

Current Owner Email:      Current Agent Email:
______________________________________________   ____________________________________________
______________________________________________   ____________________________________________
______________________________________________   ____________________________________________
______________________________________________   ____________________________________________

I CERTIFY THAT THE INFORMATION PROVIDED IS ACCURATE AND COMPLETE TO THE BEST OF MY KNOWLEDGE, INFORMATION AND BELIEF. I UNDERSTAND THAT IF ANY OF THE INFORMATION CONTAINED HEREIN IS WILLFULLY FALSE, I AM SUBJECT TO PUNISHMENT.

DATE      SIGNATURE/CERTIFICATION
___________________________________________________________

TITLE OF PERSON FILING FORM
___________________________________________________________

TELEPHONE NO.    ADDRESS
___________________________________________________________

lmh:12/2021