

**TOWNSHIP OF VERONA
RENT CONTROL BOARD**

**REQUEST FOR RENT INCREASE DUE TO MAJOR CAPITAL
IMPROVEMENTS OR ADDITIONAL SERVICES SURCHARGE**
(Pursuant to § 402-21(D) of the Township Code)

Property Owner Information:

Property Owner Name: _____

Managing Member Name: _____

Mailing Address: _____

Physical Address: _____

Daytime Telephone Number: (_____) _____

Email Address: _____

Attorney Preparing the Application (if applicable):

Name: _____

Of the Firm: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Telephone Number: (_____) _____

Email Address: _____

Property Information

Block: _____ Lot: _____ Qualifier: _____

Address: _____ Verona, New Jersey 07470

Date property was purchased: _____ Purchase price: _____

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Please submit documentation demonstrating the veracity of the costs of the capital improvements listed below.

CATEGORY	ITEM	AMORTIZATION PERIOD	TOTAL COST
Heating			
Structural			
Plumbing			
Air-Conditioning			
Power			
Elevators			
Other			

**Attach additional sheets for additional information*

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Proposed Allocation of Costs Of Capital Improvements

NAME	UNIT #	ALLOCATION OF COST PER UNIT	OLD RENT	NEW PROPOSED RENT	PERCENT INCREASE IN RENT

**Attach additional sheets for additional tenants*

The foregoing statements are made by the undersigned under oath and with full knowledge that if any of the same is a willful misstatement of fact; the penalties provided for in Chapter 402 of the Code of the Township of Verona shall apply.

Property Owner (or agent) Signature: _____

Dated: _____

This form shall be accompanied by a Major Capital Improvement Application Fee of \$300 plus an Escrow Payment of \$1,000 (separate check) (Pursuant to § A565-1 of the Township Code).