



Robbinsville
Schools

155 Robbinsville Edinburg Road
Robbinsville, NJ 08691

Central Registration Office
609-632-0910 (2281)

OWNER / LANDLORD AFFIDAVIT

Complete Only If Applicable

After completing Section I, have the owner / landlord complete Sections II, III, and IV of this form. Have the form notarized and bring it along with a copy of your lease agreement to your registration appointment.

Section I: Tenant Information

Last Name				First Name			
Street Address			City		State		Zip
Home Phone				Alternate Phone			

Section II: Owner / Landlord Information

Last Name				First Name			
Street Address			City		State		Zip
Home Phone				Alternate Phone			

Section III: Leasing Information

When did tenants move in?				How long is the lease agreement?			
Type of rental agreement:	Yearly		Month to Month		Rent to Own		
List names of all persons living in the residence:							
1.				6.			
2.				7.			
3.				8.			
4.				9.			
5.				10.			

Section IV: Affidavit

I attest that to the best of my knowledge the information is true and correct, and I am aware that fraudulent statements or claims may be prosecuted to the full extent of the law.

Signature of Owner / Landlord

Date

Sworn and subscribed before me this _____
day of _____, 20_____

Seal

Notary Signature

*Sharon Elementary School
234 Sharon Road
Robbinsville, NJ 08691
609-632-0960 / Fax: 609-259-7506
Grades K-4*

*Pond Road Middle School
150 Pond Road
Robbinsville, NJ 08691
609-632-0940 / Fax: 609-918-9011
Grades 5-8*

*Robbinsville High School
155 Robbinsville Edinburg Road
Robbinsville, NJ 08691
609-632-0950 / Fax: 609-371-7961
Grades 9-12*