



CITY OF JERSEY CITY

Department of Housing, Economic Development and Commerce

Division of Housing Preservation

Office of Landlord/ Tenant Relations

STEVEN M. FULOP
MAYOR

LANDLORD APPLICATION FOR CAPITAL IMPROVEMENT

This Application must be filled out completely in order for it to be processed

Block # _____ Lot # _____ CLAIM # C -

1. Name of Landlord: _____

2. Address: _____ Suit # _____

City : _____ State: _____ Zip: _____

3. Telephone: () _____

4. If Corporate Landlord: _____

Name of Officer preparing this application _____

Title: _____

Address: _____

Telephone: () _____

5. If Attorney preparing this application: _____

Name: _____

Address: _____

Telephone: () _____

6. Address of Building: _____ Apt # _____

Jersey City, New Jersey Zip : 0730

		Units	Number of Windows	Sq. Ft.
7. # of Rental Units:	Residential:	_____	_____	_____
	Commercial:	_____	_____	_____
	Total:	_____	_____	_____

8.# of Rooms: _____

Chapter 260-9 Sec. D # 2, there is hereby established the schedule of fees for filling a Capital Improvement application to the Rent Leveling Board, which fees shall be payable to the City of Jersey City as provided in Chapter 160 fees and charges - \$ 20.00 per housing space for major or minor capital improvement

342 MARTIN LUTHER KING DRIVE • JERSEY CITY, N.J 07305
PHONE: (201) 547-5127

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Itemize the cost for improvements of these services and indicate the amortization period for this investment (If doing Capital Improvement in more than 1 apartment, separate costs for each apartment).

PROPOSED METHOD OF ALL ALLOCATION		5/10 years	Number of			
Common Areas	Cost		Sq. ft	Windows	Rooms	Units
Items						
Heating :		\$				
Structural:		\$				
Plumbing:		\$				
Fire prevention:		\$				
Electrical:		\$				
Other:		\$				
Apt #						
Items:						
Heating :		\$				
Structural:		\$				
Plumbing:		\$				
Fire prevention:		\$				
Electrical:		\$				
Other:		\$				
Total \$						

PROPOSED METHOD OF ALL ALLOCATION

Apt #		Cost	5/10	Number of			
			years	Sq. ft	Windows	Rooms	Units
Items							
Heating :		\$					
Structural:		\$					
Plumbing:		\$					
Fire prevention:		\$					
Electrical:		\$					
Other:		\$					
Total		\$					

Apt #							
Heating :		\$					
Structural:		\$					
Plumbing:		\$					
Fire prevention:		\$					
Electrical:		\$					
Other:		\$					

CLAIM # C -

PLEASE COMPLETE AS APPLICABLE

**PROPOSED ALLOCATION OF COSTS OF CAPITAL IMPROVEMENT
OR IMPROVED OR INCREASED SERVICES.**

Tenant's Name	Apt #	Phone #	NUMBER OF			ALLOCATION OF COSTS PER				Current Rent	Rent Increase	Proposed New Rent
			Rooms	Windows	Sq Ft.	Unit	Room	Window	Sq. ft.			

NOTICE OF CAPITAL IMPROVEMENT

Landlord's name _____

Address: _____

City: Jersey City **State:** NJ **Zip:** 0730

Phone: _____

Building address: _____

Jersey City, New Jersey: **Zip:** 0730

Dear: _____ **Apt #** _____

Please be advised that I have made an application for a capital improvement rent increase to the Rent Leveling Board. The basis for this application is for improvement performed on your building/apartment, as follows (summary of improvement):

I am requesting a rent increase of \$ per room/per apartment/per window
per month, for a total increase of \$ per month for your apartment.

This increase cannot be collected prior to the Rent Leveling Board making a final decision on the application.

This notice is being sent in compliance with § Chapter 260 – 5. C (Multiple Dwelling Rent Control) of the Jersey City Code.

A copy of my application together with supporting documentation is filed in the Rent Leveling Office, 342 Martin Luther King Drive, Jersey City, N.J. 07305. You may write to request a copy from me, the Landlord.

AFFIDAVIT IN SUPPORT OF APPLICATION

STATE OF NEW JERSEY

SS:

COUNTY OF HUDSON

Having submitted this application and the required documentation, I hereby swear/affirm that to the best of my knowledge, all the information and attachments supplied are accurate and further that there is no attempt on my part to conceal any evidence that may have a bearing on this application.

I further swear/affirm that I am the owner or the legitimate representative of the owner and that I have been duly appointed to represent the owner in the processing of this Application for a Capital Improvement Rent Increase.

I further swear/affirm that I have served notice of this application upon each of the tenants as required by §260- 5C of the Jersey City Municipal Code, and that true copies of said notice to the tenants are hereby attached.

I hereby swear/affirm that all the statements made by me and the documents provided are true.

Owner's Signature/Print Below:

Date: _____

SWORN TO AND SUBSCRIBED BEFORE ME

On this _____ day of _____ 20__

Personally appeared _____ who has satisfactorily identified himself/herself as the signer of the above document.

Notary Public Print Name and Commission Expiration Date

Check List for Capital Improvement

- 1- Signed and completed Application
- 2- Description of work that was done - include pictures both before and after
- 3- Proof that work was done - contracts, invoices for all materials and contractors, (itemized cost must be provided in proposals/contracts), proof of all payments (credit card receipts, cancelled checks) certificate of continued occupancy.
- 4- Copies of applicable permits, and compliance with applicable official codes.
- 5- Proof of compliance with §260-3J which requires that the landlord provide each tenant with a copy of the Truth-in-Renting Statement and the landlord identity disclosure.
- 6- Proof of Compliance with §260-3C(2) – filing the annual Landlord Registration Statement pursuant to §260-2F.
- 7- Payment of fees in amount of \$20.00/housing space to City of Jersey City Treasurer.
- 8- Proof of Notice to Tenants with copies attached to Application.

Formula for calculating rent increase

All Capital Improvements are depreciated over a useful life of 5 year for minor or 10 year major capital improvements. (Divide by 60 months or 120 months to calculate depreciation for 5/10 years.)

Depreciated sum must be prorated for each apartment. Prorate equally if all apartments are of equal in size. If apartments are not equal in size use # of rooms to prorate the depreciated sum.

Note: The rent for an apartment can only be increased in proportion to the benefit to that apartment.