

Tinton Falls Zoning Board of Adjustment
556 Tinton Avenue
Tinton Falls, NJ 07724
732.542.3400 x215



OWNERSHIP DISCLOSURE AFFIDAVIT

Complete the Following Information and
Check the Box(es) Below Which Is/Are Applicable.

Applicant Name _____
Application Number _____
Block _____ Lot(s) _____

The owner and/or applicant are under a continuing obligation to update this Affidavit immediately upon change of ownership or ownership interest.

Attach additional page(s) as necessary to fully comply.

- Individual(s) Sole Proprietorship

Name(s) _____
Address(es) _____

STOP.

No further information is required.
Sign and notarize the next page.

If any or all of the following boxes are checked, **continue and complete the Statement on the next page.**

- Partnership Corporation Other

Pursuant to N.J.S.A. 40:55D-48.1, the names and addresses of all persons owning ten percent (10%) or more of the stock in a corporate applicant or ten percent (10%) or more interest in any partnership applicant must be disclosed.

In accordance with N.J.S.A. 40:55D-48.2, that disclosure requirement applies to any corporation or partnership which owns more than ten percent (10%) interest in the applicant followed up the chain of ownership until the names and addresses of the non-corporate stockholders and partners exceeding the ten percent (10%) ownership criterion have been disclosed.

Name _____
Address _____
Interest _____

Name _____
Address _____
Interest _____

Name _____
Address _____
Interest _____

Name _____
Address _____
Interest _____

Name _____
Address _____
Interest _____

Name _____
Address _____
Interest _____

Signature

Print Name

Title

STATE OF NEW JERSEY, COUNTY OF _____

SS:

Sworn and subscribed to before me on this ____ day of _____, 20__.

(Notary Public)

(Seal)