



**Department of  
Housing, Economic Development  
And Commerce  
Division of Tenant/Landlord Relation  
30 Montgomery St, Suite 415  
Jersey City NJ 07302-3821  
Phone (201) 547-5127 Fax (201) 547-5803**

**JERRAMIAH HEALY, MAYOR**

Claim # C -

Date:

**Landlord's Application for Capital Improvement**

1. Name of Landlord: \_\_\_\_\_  
 2. Address: \_\_\_\_\_ Apt # \_\_\_\_\_  
 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 : \_\_\_\_\_

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

8.# of Rooms: \_\_\_\_\_

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

Common Areas	Cost	10 years	Sq. ft	Number of Windows	Rooms	Units
<b>Items</b>						
<b>Heating :</b>	\$					
<b>Structural:</b>	\$					
<b>Plumbing:</b>	\$					
<b>Fire prevention:</b>	\$					
<b>Electrical, Others:</b>	\$					
	\$					
<b>Apt #</b>						
<b>Items:</b>						
<b>Heating :</b>	\$					
<b>Structural:</b>	\$					
<b>Plumbing:</b>	\$					
<b>Fire prevention:</b>	\$					
<b>Electrical, Others:</b>	\$					







**NOTICE OF CAPITAL IMPROVEMENT**

**Landlord's Name:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip:** \_\_\_\_\_

**Phone:** ( ) \_\_\_\_\_

**Building address:** \_\_\_\_\_

**Jersey City, New Jersey:** **Zip:** \_\_\_\_\_

**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 can not be collected prior to the Rent Leveling Board making a final decision on the application.**

This notice is to comply with § **Chapter 260 – 5. C** (Multiple Dwelling Rent Control) of the Jersey City Code.

A copy of my application together with supportive documentation is filed in the Rent Leveling Office, 30 Montgomery Street, 4<sup>th</sup> Floor, Room 415, Jersey City, N.J. 07302. **You may write to request a copy from me, the Landlord.**

Date: \_\_\_\_\_ Signed by: \_\_\_\_\_

**CERTIFICATION IN SUPPORT OF APPLICATION**

**STATE OF NEW JERSEY**

**SS:**

**COUNTY OF HUDSON**

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

I am aware that if any of the information supplied in this application is willfully false I am subject to punishment.

I further certify that I have served notice of this application upon each of the tenants as required by **§ chapter 260- 5, C of the Jersey City Code** (Multiple Dwelling Rent Control); and that copies of said notice to the tenants are hereby attached.

**Landlord Signature** \_\_\_\_\_

**Sworn to and subscribed before me**

**This** \_\_\_\_\_ **Day of** \_\_\_\_\_ **20** \_\_\_\_\_

**Notary Public**  
(Form B-10P  
File RG

## **Check list for Capital Improvement Application**

- 1- *Complete Capital Improvement Application, Notarized ( page # 7 )*
- 2- *Description of work that was done during the Capital Improvement (pictures before and after).*
- 3- *Proof that work was done- proposal for work*
- 4- *Proof of payment, Canceled checks, receipts, or credit card payments.*
- 5- *Copies of applicable permits, and of compliance to applicable official codes approval*
- 6- *Fee payment of \$ 10.00 per unit – checks made to City of Jersey City Treasury*
- 7- *Current Rent Registration with this office*

### **Formula for calculating rent increase**

#### **Example:**

*All Capital Improvement is depreciated over a 10 year useful life. You may divide by 120 months (10 years dep.)*

*Prorate that result into the # of apartments (if apartments are equal in sizes).*

*If apartments are not equal in size use # of rooms*

*\$10,000 divided by 120 months (10 years)*

*= \$ 83.33 divided by (# of rooms)*

*= \$ ? Amount per apartment a month*

*E.g. \$ 10,000 spent equally in a 6 family apartment (all of the same size).*

*Will result in a monthly rent increase per apartment as follows:*

*\$ 83.33 divides by 6 apts. Equal \$ 13.88 increase per apt. per month*

*P.S. each apartment can only be increased in proportion to how it benefits from the Capital Improvement work.*