



# Township of Jackson

**RENT LEVELING BOARD**  
95 W. VETERANS HIGHWAY  
JACKSON, NEW JERSEY 08527

## **APPLICATION FOR RENT DECREASE FOR AN APARTMENT PURSUANT TO CHAPTER 334 SECTION § 334-17**

Any tenant seeking a decrease in rent shall notify the Landlord and the Rent Leveling Board at least 30 days prior to the effective date of the requested decrease. The failure to inform the landlord of a requested decrease will automatically void the request for decrease.

1. Present a copy of this application to the Clerk of the Township of Jackson,
2. Mail a copy to the landlord (make sure to get proof of delivery).
3. Then Mail, Fax, or e-mail a copy (along with proof of delivery to landlord) to the board accountant:

Carmen J. Memoli, CPA  
222 Oak Avenue, Suite 5  
Toms River, NJ 08753  
Office: 732-240-3366  
FAX: (732) 240-5305  
e-mail: [cjm@memolicpa.com](mailto:cjm@memolicpa.com)

NAME OF APPLICANT: \_\_\_\_\_

ADDRESS OF APPLICANT: \_\_\_\_\_

TELEPHONE NUMBER: \_\_\_\_\_ CELL PHONE NUMBER: \_\_\_\_\_

EMAIL ADDRESS: \_\_\_\_\_

APPLICANTS REPRESENTATIVE (If Applicable): \_\_\_\_\_

REPRESENTATIVE'S ADDRESS: \_\_\_\_\_

REPRESENTATIVE'S TELEPHONE NUMBER: \_\_\_\_\_

REPRESENTATIVE'S EMAIL ADDRESS: \_\_\_\_\_

NAME OF COMPLEX: \_\_\_\_\_



