

Notice to All Municipal Clerks & Administrative Agents

Due to the recent surge in condominium conversions in New Jersey, the Landlord-Tenant Information Service would like to take this opportunity to remind all municipal clerks and administrative agents about their responsibilities under the Condominium Conversion, and Senior and Disabled Protected Tenancy Laws of New Jersey. This correspondence is meant to provide a general overview of what administrative agents need to know to properly administer the Protected Tenancy Laws. It is not a complete narration of the laws. Please refer to the laws and regulations concerning condominium conversions and protected tenancy for the entire text of the laws.

Condominium Conversions

Prior to filing the application for registration of conversion with the Planned Real Estate Development Office (PRED), the owner must notify the administrative agent of his intent to file for the application. (N.J.S.A. 2A:18-61.27) After the landlord has registered with the PRED office to convert a building to condominium units, the administrative agent should expect to receive from the landlord a “notice of intent” and a “full plan of conversion.” (N.J.A.C. 5:24-1.3) The owner/sponsor must also serve the tenants with the notice of intent and full plan of conversion. The landlord is required to supply a copy of the New Jersey Administrative Code, title 5, chapter 24, subchapter 1, to all tenants of the building being converted as a part of the notice of intent to convert and full plan of conversion. (N.J.A.C. 5:24-1.11)

If the landlord intends to evict the tenants due to the conversion, he must serve them with a three year notice to quit, 60 days after the notice of intent and full plan of conversion have been served on the tenants. (N.J.A.C. 5:24-1.3) If it is a non-eviction, meaning the landlord does not intend to evict the tenants based on the conversion, the landlord will not serve the tenants with a notice to quit, nor will the tenants be eligible to apply for protected tenancy status.

Pre-Conversion tenants that have received a three year notice to quit have the right to request comparable housing from their landlord. This form should be included in the packet sent to the administrative agent from the landlord. The administrative agent must forward this to the residence along with the other forms in the packet. However, the administrative agent is not responsible for ensuring that comparable housing is offered. This matter would be addressed in any ensuing eviction action. In addition, pre-conversion tenants that have received their three year notice to quit shall receive a moving expense in the form of a waiver of one month’s rental payment from the landlord. (N.J.A.C. 5:24-1.8) (Again this provision is enforced by the Court not the administrative agent)

Administrative Agent or Agency

The governing body of the municipality may authorize a municipal board, agency or officer to act as its administrative agency to administer the Protected Tenancy Acts or may enter into a contractual agreement with a county office on aging or similar agency to act as its administrative agency. If there has been no authorization or agreement the Protected Tenancy Acts shall be administered by the municipal Rent Leveling Board or Rent Control Board. If the municipality does not have such a board, the municipal clerk must administer the acts. (N.J.S.A. 2A:18-61.26)

Senior and Disabled Protected Tenancy

Prior to filing the application for registration of conversion with the Planned Real Estate Development Office, the owner must notify the administrative agent of his intent to file for an application for registration of a condominium conversion. (N.J.S.A. 2A:18-61.27) In addition the owner must supply the administrative agent with a list of every tenant residing in the premises along with stamped envelopes addressed to each tenant, and sufficient copies of the notice (Forms T-2 and/or T-3) tenants and application forms for protected tenancy status.

Within 10 days thereafter the administrative agent shall notify each residential tenant in writing of the owner's intention to convert and evict, and the applicability of the Senior and Disabled Protected Tenancy Act. Within two business days of mailing these notices the administrative agent must provide the owner and the Landlord-Tenant Information Service with an affidavit or certification of mailing. (N.J.A.C. 5:24-2.10(b))

A tenant seeking protected tenancy status must file a completed application form with the administrative agency within 60 days of receipt of the notice and application form from the administrative agency. However, a completed application form may be submitted at any time prior to the conversion recording if the administrative agent is satisfied that there was a reasonable cause for the delay in filing the application. (N.J.A.C. 5:24-2.3)

Pursuant to N.J.S.A. 2A:18-61.28, within 30 days after receipt of an application for protected tenancy status by a tenant, the administrative agent shall make a determination of eligibility and send written notice of the determination of eligibility or ineligibility to the tenant. Within two business days of having mailed all notices of determination of eligibility to all applicants who filed during the 60 day period, the administrative agent must notify the Landlord Tenant Information Service and the owner of the determinations for protected tenancy status and include an affidavit or certification by the person who mailed the notices. (N.J.A.C. 5:24-2.10 (c)) Any determinations subsequent to that should be sent as necessary. The address for the Landlord-Tenant Information Service is P.O. Box 805, Trenton, New Jersey 08625-0805.

Please note that the administrative agency making the determinations for protected tenancy status is responsible for maintaining the protected tenancy determinations on record for 40 years or the length of the protected tenancy status which ever is longer.

Administrative Hearings (N.J.A.C. 5:24-2.7)

Administrative agents must advise all applicants for protected tenancy status of their right to a hearing to aggrieve any agency determinations and the requirements for filing for such a hearing. Any person aggrieved by any determination of an administrative agency shall be entitled to an administrative hearing before the agency or agent. Application for an administrative hearing shall be made within 10 days of receipt of the determination. Administrative hearings shall be held within 10 days of application, except in extenuating circumstances. Any notice of administrative hearings shall be given to all interested parties.

Condominium Packet

Attached is a list of relevant laws and a condominium packet containing instructions and forms to be used by the owner/sponsor, tenants and administrative agent in application of the condominium conversion, protected tenancy and eviction laws as they pertain to protected tenancy for tenants in condominium conversions. You may request a copy of the Condominium Packet by e-mailing the Landlord-Tenant Information Service at LTInfo@dca.state.nj.us or by writing us at P.O. Box 805, Trenton, New Jersey 08625-0805.

Relevant Laws

1. Condominium, Fee Simple and Cooperative Conversion and Mobile Home Park Retirement Regulations, N.J.A.C. 5:24-1 through 5:24-1.12.
2. Senior Citizens and Disabled Protected Tenancy Regulations, N.J.A.C. 5:24-2.1 through 5:24-2.11.
3. Protected Tenancy in Qualified Counties Regulations, N.J.A.C. 5:24-3.1 through 5:24-3.4.
4. Senior Citizens and Disabled Protected Tenant Income Figures for 2006
5. Condominium and Cooperative Conversion Law, N.J.S.A. 2A:18-61.7 through 61.21.
6. Senior Citizens and Disabled Protected Tenancy Law, N.J.S.A. 2A:18-61.22 through 61.39.
7. Tenant Protection Law of 1992, N.J.S.A. 2A:18-61.40 through 2A:18-61.65.

Instruction Sheet and Checklist for Administrative Agents

Owners Must Submit the following forms to the Administrative Agent/Agency

The owner must provide the Administrative Agent for the municipality with a Notice of Intent to Convert, A Full Plan of Conversion, and the names and addresses of all tenants residing in the building being converted. The owner must also provide enough copies for every tenant of each of the following forms provided by the Department of Community Affairs along with unsealed, stamped envelopes addressed to **each** tenant:

- Instruction Sheet and Checklist for applying for Sr. and Disabled Protected Tenancy and Protected Tenancy;
- Rights of Tenants in Condominium Conversion, Pre Conversion Tenants (T-1);
- “Notice” (Form T-2 (Sr. and Disabled Tenants) & Form T-3 (Protected Tenancy for Hudson County residents only));
- Application (Form T-4);
- Tenant Affidavit (Form T-5);
- Tenant Notification Requirement; (Form T-6);
- Income eligibility List (Form T-7 (Sr. and Disabled Tenants) & Form T-8 (Protected Tenancy for Hudson County residents only));
- Comparable Housing Request (Form T-9);
- Condominium and Cooperative Conversion Regulations;
- Senior Citizens and Disabled Protected Tenancy Regulations;
- Protected Tenancy in Qualifying Counties Regulations (Hudson County residents only).

Administrative Agents Instructions for filling out Tenants’ Forms

Notice (Form T-2 and T-3)

- Insert name of municipality where indicated
- Insert current income figures for the relevant county where indicated use form T-7 or T-8
- Insert date as indicated (allowing 60 days to apply for protected tenancy status)
- Insert the name and address of the administrative agent/agency as indicated
- Insert the administrative agent’s/agency’s phone number as indicated

Application (Form T-4)

- Insert the name and address of the administrative agent/agency as indicated in Part C
- Insert the administrative agent’s/agency’s phone number as indicated in Part C

Optional Administrative Agency Forms provided by the Department of Community Affairs.

You may use the forms listed below when administering your duties under the Senior and Disabled Protected Tenancy Act and Protected Tenancy Act of 1992.

- Letter to Tenant from Administrative Agent (A-1)

- Letter to Tenant Requesting Additional Information (A-2)
- Eligibility Letter Granting Protected Tenancy Status or Conditional Eligibility (A-3)
- Denial Letter Denying Protected Tenancy Status (A-4)
- Right To a Hearing Notice (A-5)
- Application for an Administrative Hearing to Aggrieve Protected Tenancy Determination (A-6)

Letter to Tenant from Administrative Agent (Form A-1)

- Use as a cover letter when sending out Protected Tenancy Packets to Tenants

Letter to Request Additional Information (Form A-2)

- Fill in appropriate information and send to tenant

Eligibility Letter (Form A-3) and Denial Letter (Form A-4)

- check off the appropriate determination, fill out the remainder of the letter and sign
- send a copy of the Comparable Housing Request Form with all denial letters

Right to a Hearing (Form A-5)

- Insert name, address & telephone number of the hearing officer or administrative agent/agency as indicated
- Be sure to send this form with all denial letters

Application for an Administrative Hearing to Aggrieve Protected Tenancy Determination (Form A-6)

- Insert name, address & telephone number of the hearing officer or administrative agent/agency as indicated
- Be sure to send this form with all denial letters

Administrative Agents may obtain complete Condominium Conversion packets from the:
Department of Community Affairs
Landlord-Tenant Information Service
Post Office Box 805
Trenton, New Jersey 08625

Date:

Re:

Dear Tenant,

The owner of your residential building has notified me of his intent to convert the above referenced property to a condominium. I have enclosed a protected tenancy packet for your information and use which includes:

- a. Instruction Sheet and Checklist for Applying for Senior and Disabled Protected Tenancy and (Protected Tenancy for Hudson County Residents Only);
- b. Rights of Tenants in Condominium Conversions;
- c. "Notice" of Intent to Convert;
- d. Application for Senior Citizen and Disabled Protected Tenancy and (Protected Tenancy for Hudson County Residents Only);
- e. Tenant's Affidavit;
- f. Tenant Notification Form;
- g. Income Figures for Senior and Disabled Protected Tenancy;
- h. Income Figures for Protected Tenancy (Hudson County Residents Only);
- i. Comparable Housing Request Form;
- j. Regulations for Condo Conversions – N.J.A.C. 5:24-1.1 et seq.;
- k. Regulations for Senior and Disabled Protected Tenancy – N.J.A.C. 5:24-2.1 et seq.;
- l. Regulations for Protected Tenancy (Hudson County Residents only) - N.J.A.C. 5:24-3.1 et seq.

You may be eligible for senior citizen or disabled protected tenancy status if you fall within the income eligibility requirements and the building has been your principal residence for a least one year and:

- 1) you are at least 62 years of age or soon will be 62; or
- 2) you are disabled.

You may be eligible for protected tenancy status for qualifying counties (Hudson County only) if:

- 1) the building has been your principal residence for at least one year;
- 2) and you fall within the income eligibility requirements.

You automatically qualify for protected tenancy under the Tenancy Protection Act of 1992 if you are a Hudson County resident who is disabled or 75 years of age or older. **However, you must submit the enclosed application to be granted protected tenancy status.**

A tenant may be considered to be disabled if the tenant is totally and permanently unable to engage in any substantial gainful activity by reason of any medically determined physical or mental impairment, including blindness, or a person who has been honorably discharged from military service who is rated as having a 60% disability or higher as a result of that service.

If you would like to apply for protected tenancy, follow the instructions and return the application and other required documents as indicated on the enclosures.

NOTE: IF YOU DO NOT QUALIFY FOR SENIOR AND DISABLED PROTECTED TENANCY OR PROTECTED TENANCY FOR HUDSON COUNTY, YOU ARE ENTITLED TO COMPARABLE HOUSING. USE THE COMPARABLE HOUSING REQUEST FORM (T-9) TO REQUEST COMPARABLE HOUSING.

Sincerely,

Administrative Agent

Enclosures

Date:

Tenant's Address

Re:

Dear Tenant:

We have received your application(s) for protected tenancy status. However, it can not be processed until we receive the following checked items:

- Birth Certificate
- Proof of Social Security Benefits (i.e. Certificate of Entitlement)
- Proof of Disability (i.e. Certification of Physician)
- Proof of Income (W-2)
- Copy of New Jersey Income Tax Return
- Other _____

Please send the above requested items within 10 days of receipt of this letter to:

(Insert address and telephone number for the administrative agency)

If you have any questions, please contact:

Date:

Tenant's Name & Address

Re:

Dear Tenant:

Based on the information you submitted with your application for protected tenancy and in accordance with the Senior Citizen and Disabled Protected Tenancy Law, N.J.S.A. 2A:18-61.22 et seq. and/or the Tenant Protection Act (for Hudson County residents only), N.J.S.A. 2A:18-61.40 et seq., I hereby render the following determination:

- Protected Tenancy Status is granted under the Senior Citizen and Disabled Protected Tenancy Act.
- Protected Tenancy Status is granted under the Tenant Protection Act.
- You are conditionally eligible for protected tenancy status under the Senior Citizen and Disabled Protected Tenancy Act or the Tenant Protection Act (Hudson county residents only) for the following reason(s):

You will automatically become eligible for protected tenancy status when you turn 62 years old or 75 years old (Hudson residents) on _____ provided the conversion recording occurs after this date. (date)

You will automatically become eligible for protected tenancy status when you meet the one year principal residency requirement on _____ provided the conversion recording occurs after this date. (date)

If you have any questions, please contact me at _____.
(insert your phone number here)

Sincerely,

Administrative Agent

c. Owner/sponsor

“YOU HAVE THE RIGHT TO REVIEW, AT THIS OFFICE, ANY DOCUMENTATION UPON WHICH THIS DETERMINATION WAS BASED WITHIN FIVE DAYS OF YOUR RECEIPT OF THIS NOTICE.”

Date:

Tenant's Name & Address

Re:

Dear Tenant:

Based on the information you submitted with your application for protected tenancy and in accordance with the Senior Citizen and Disabled Protected Tenancy Law, N.J.S.A. 2A:18-61.22 et seq., and the Tenant Protection Act (for Hudson County residents only), N.J.S.A. 2A:18-61.40 et seq., I hereby render the following determination:

Protected Tenancy Status is denied under the Senior Citizen and Disabled Protected Tenancy Act for the following reason(s):

Income is over the County Limit

Not the applicant's principal place of residence

Applicant failed to provide the requested documentation

Other _____

***This office will automatically review your application to determine if you qualify for protected tenancy under the Tenant Protection Act. (Hudson County Residents Only)**

Protected Tenancy Status is denied under the Tenant Protection Act for the following reason(s)

Income is over the County Limit

Not the applicant's principal place of residence

Applicant failed to provide the requested documentation

Other _____

If you have any questions you may contact me at _____.
(insert your phone number here)

Sincerely,

Administrative Agent

c. Owner/Sponsor

“YOU HAVE THE RIGHT TO REVIEW, AT THIS OFFICE, ANY DOCUMENTATION UPON WHICH THIS DETERMINATION WAS BASED WITHIN FIVE DAYS OF YOUR RECEIPT OF THIS NOTICE.”

Right To A Hearing

“The owner/sponsor and the tenant have a right to review at this office, any documentation upon which this determination is based within five days of receipt of this notice.”

The owner/sponsor and the tenant have a right to appeal the determination of the agent/agency granting or denying Senior Citizen or Disabled Protected Tenancy Status and/or Protected tenancy status for Hudson County residents.

The landlord/sponsor and the tenant have the right to file for a hearing to aggrieve this determination. The application for a hearing must be filed, together with any required filing fees and other documents, within 10 days of receipt of the determination notice.

The application for a hearing must include a statement setting forth the legal or factual basis for the appeal.

The application for a hearing to appeal the determination must be filed with the following person at the following address:

(insert the name and address of the hearing officer or administrative agent/agency)

If you are 75 years of age or older and a resident of Hudson County you automatically qualify for Protected Tenancy under the Tenant Protection Act.

If you do not qualify for protected tenancy status, see the Pre-Conversion Tenant’s Rights Handout included in this packet for your rights.

You have the right to request comparable housing. You may do so by filling out and returning the Comparable Housing Request Form to your landlord.

**Application for an Administrative Hearing To Aggrieve
Protected Tenancy Determination**

Name of Person Filing Grievance: _____

Street Address: _____

Apartment number: _____

City: _____ State: _____

Zip Code: _____ County: _____

Home phone: _____ Work phone: _____

Name of Building or Project (if any): _____

Are you the tenant applicant? _____

Are you the Owner/Sponsor? _____

Other ? _____, please explain _____

I am grieving the determination of (circle one) eligibility/ineligibility made by the Administrative Agent on _____ for (circle all that apply) Senior Citizen and Disabled Protected Tenancy Status/Protected Tenancy Status (for Hudson County residents only) for the following tenant:

Tenant's Name: _____

Street Address: _____

Apartment number: _____

City: _____ State: _____

Zip Code: _____ County: _____

All applications for an administrative hearing must be made within 10 days of receipt of your determination notice. The application must include a statement setting forth a factual or legal basis for this grievance. Please attach your statement to this application and forward it along with any relevant documentation and applicable fees to:

(insert address and telephone number of hearing officer of administrative agent/agency)

Instruction Sheet and Checklist for Owners/Sponsors

When an owner/sponsor seeks to convert a building from the rental market to a condominium or cooperative he or she must comply with the Condominium and Cooperative Conversion, Protected Tenancy, and Eviction statutes and regulations for the State of New Jersey.

Notices to Tenants

Pursuant to the Condominium and Cooperative Conversion law, the owner must provide each tenant with a copy of the following documents:

- 60 Day Notice of Intent to Convert;
- Full Plan of Conversion.

Required Forms and Documents Concerning Tenants Rights

The owner/sponsor must provide the Administrative Agent for the municipality with a Notice of Intent to Convert, A Full Plan of Conversion, and the names and addresses of all tenants residing in the building being converted. The owner/sponsor must also provide enough copies for every tenant of each of the following forms provided by the Department of Community Affairs along with unsealed, stamped envelopes addressed to **each** tenant:

- Instruction Sheet and Checklist for applying for Sr. and Disabled Protected Tenancy and Protected Tenancy;
- Rights of Tenants in Condominium Conversion, Pre Conversion Tenants (T-1);
- "Notice" (Form T-2 (Sr. and Disabled Tenants) & Form T-3 (Protected Tenancy));
- Application (Form T- 4);
- Tenant Affidavit (Form T-5);
- Tenant Notification Requirement; (Form T- 6);
- Income Eligibility List (Form T- 7 (Sr. & Disabled Tenants) & Form T-8 (Hudson County residents only));
- Comparable Housing Request (Form T-9);
- Condominium and Cooperative Conversion Regulations;
- Senior Citizens and Disabled Protected Tenancy Regulations;
- Protected Tenancy In Qualifying Counties Regulations (Hudson County Only).

Owner/Sponsor Instructions for Filling Out Forms

Tenant Notification Requirement (Form T -6)

- Insert owner's/sponsor's address where indicated

Comparable Housing Request (Form T-9)

- Insert name and address of owner/sponsor as addressee
- Insert project name and reference information on the re: line

A copy of the Administrative Agent's/agency's affidavit of mailing must be submitted along with the owner's/sponsor's request for registration to the Department of Community Affairs, Planned Real Estate Development Office, P.O. Box 805, Trenton, New Jersey 08625.

Instruction Sheet and Checklist for Tenants
Applying for Senior and Disabled Protected Tenancy and
Protected Tenancy for Hudson County

Enclosed are the following documents for your information and use in applying for protected tenancy status. Please follow the instructions below when applying for protected tenancy status.

Checklist

- Instruction Sheet and Checklist for applying for Sr. and Disabled Protected Tenancy and Protected Tenancy
- Rights of Tenants in Condominium Conversion, Pre Conversion Tenants (T-1)
- "Notice" (Form T-2 (Sr. and Disabled Tenants) & Form T-3 (Protected Tenancy))
- Application (Form T-4)
- Tenant Affidavit (Form T-5)
- Tenant notification requirement; (Form T-6)
- Income Eligibility List (Form T- 7 (Sr. and Disabled Tenants) & Form T-8 (Hudson County residents only))
- Comparable Housing Request Form (T-9)
- Condominium and Cooperative Conversion Regulations
- Senior Citizens and Disabled Protected Tenancy Regulations
- Protected Tenancy in Qualifying Counties Regulations (Hudson County Only)

Instructions

Application (Form T-4)

- Check off the type of protection for which you are applying
- In Part A (Personal Information) fill in all of the information requested
- If you are disabled be sure to include proof of your disability when you return the application

Note: For Hudson County residents only. If you are applying for Protected Tenancy for Hudson County and you are disabled or 75 years of age or older you do not have to provide proof of income. You may skip Part C.

- In Part B (Financial Information) fill in all sources and amounts of income for each member of your household
- Provide proof of income for each household member, such as tax returns and W-2s
- Provide additional information regarding your liabilities where indicated
- Mail the completed application along with supporting documents and the Tenant's Affidavit to the Administrative Agent/Agency at the address listed in Part C on the bottom of the form, by certified mail, return receipt requested

Tenant's Affidavit (Form T-5)

- Fill in your name, address and telephone number where indicated on the top of the affidavit
- Fill in your name on the first line where indicated
- Under paragraph number 1 fill in the date you received the Protected Tenancy Packet from the Administrative Agent/Agency
- Read and sign the affidavit. Have your signature witnessed and notarized by a notary public or other officer authorized to notarize legal documents
- Mail the completed Tenant's Affidavit along with the Application to the Administrative Agent/ Agency at the address listed on the bottom of the form, by certified mail, return receipt requested

Tenant Notification Requirement Form (Form T-6)

- Check off the type of protection for which you are applying
- Fill in the appropriate information where indicated
- Sign and date the form
- Mail the completed form to the owner/sponsor at the address listed on the bottom of the form, by certified mail, return receipt requested

Comparable Housing Request (Form T-9)

- If you are not applying for protected tenancy status or do not qualify, fill out the comparable housing form
- Include any additional reasonable requests in the space provided on page two of the form
- Insert your address where indicated on page two of the form
- Sign letter and mail certified mail, return receipt requested to your landlord.

Comparable Housing Requests must be made within 18 months of receiving your 3 year notice to quit.

Be sure to keep copies of your completed Application, Affidavit and Tenant Notification Requirement Form for your records.



**New Jersey Department of Community Affairs
Division of Codes and Standards
Landlord-Tenant Information Service**



Philip D. Murphy
Governor

Lt. Governor Sheila Y. Oliver
Commissioner

**RIGHTS OF TENANTS IN
CONDOMINIUM CONVERSION
PRE-CONVERSION TENANTS**

Pre-Conversion Tenants are those tenants whose initial tenancy began before the master deed was recorded. Tenants in any residential rental property may only be evicted when the Court has ordered an eviction. A landlord may ask a tenant to move; however, the tenant is not required to move unless a landlord files a complaint in Superior Court and the Court has ordered the eviction. Self-Help Evictions, that is entry into a dwelling unit and removal of the tenants, their property, disconnection of utilities or changing the locks without the tenant's consent or without a judgment from a court, are not permitted in N.J.

- ❑ The landlord must give tenants a three-year Notice to Quit before he or she can file for an eviction. The landlord must wait 60 days after serving the "Notice of intent" to convert and the "the full plan of conversion" before giving the three-year notice. N.J.S.A. 2A:18-61.8.
- ❑ The landlord must provide the tenants with a Notice of Intent to Convert and the Full Plan of Conversion (after the landlord has registered with the Planned Real Estate Development Office). N.J.A.C. 5:24-1.3.
- ❑ In the Notice of the Intent to Convert, tenants shall be notified of their exclusive right to purchase his or her unit, for the first 90 days after the notice is given. N.J.S.A. 2A:18-61.8.
- ❑ The landlord must provide the tenants with a copy of N.J.A.C. 5:24 as a part of the notice of intent to convert and full plan of conversion. N.J.A.C. 5:24-1.11.
- ❑ Notice of the right to apply for comparable housing. The tenant has the right to request comparable housing within 18 months of receipt of the notice. N.J.S.A. 2A:18-61.11.

- If comparable housing is not provided the tenant may be entitled to 5-one-year stays, allowing the tenant to remain in the rental unit. After the first one-year stay a landlord who is unable to relocate the tenant may buy the tenant out by paying the tenant for five months rent or by waiving five months rent and allowing the tenant to remain in the unit for that 5 month period, N.J.S.A. 2A:18-61.11 and 61.16
- During the 3-year notice period (or up to 8 years in the case of 5 one-year stays of evictions) rent increases cannot be unreasonable. If the property was regulated by the municipal rent control or rent leveling board prior to conversion, after conversion rent increases should remain in line with the limits set by the rent control ordinance. N.J.A.C. 5:24-1.12.
- After the 3-year notice period, the landlord may file for an eviction, however, if the tenant remains in possession and the landlord accepts the rent, the landlord may not rely upon the conversion as a ground for eviction. *Fairken Assoc. v. Hutchen*, 223 N.J.Super. 274 (1987)
- Pre-Conversion tenants who are evicted because the unit is being converted to a condo are entitled to moving expenses, a waiver of one month's rent. N.J.S.A. 2A:18-61.10.
- Qualifying senior citizens and disabled citizens may receive protected tenancy. The landlord must provide the Administrative Agent with a list of tenants for the property being converted. The Administrative Agent will then, based on the list send out applications for protected tenancy to all of the tenants in the building. Tenants who want to apply for protected tenancy must complete the application and return it to the Administrative Agent. The Administrative Agent works for the city or town, in which the property is located. If the tenant is approved for protected tenancy status, the landlord could not evict the tenant for up to 40 years, as long as the tenant continues to qualify for the protected tenancy. N.J.S.A. 2A:18-61.22 – 61.39.

The administrative agent provides the final determination of protected tenancy status. The tenant is responsible for keeping a copy of his or her protected tenancy determination in case of future questions.

Hudson County residents only

Pre-conversion residents in Hudson County may also apply for protected tenancy under the Tenant Protection Act of 1992, which provides protection for tenants in qualifying counties. N.J.S.A. 2A:18-61.40 –61.65.

“NOTICE”

SENIOR CITIZEN AND DISABLED PROTECTED TENANCY

THE OWNER OF YOUR APARTMENT HAS NOTIFIED _____ OF HIS
(insert name of municipality)
INTENTION TO CONVERT TO A CONDOMINIUM OR COOPERATIVE. THE
LEGISLATURE HAS PROVIDED THAT, IF YOU ARE A SENIOR CITIZEN, 62 YEARS OF
AGE OR OLDER, OR DISABLED, YOU MAY BE ENTITLED TO A PROTECTED
TENANCY PERIOD. PROTECTED TENANCY MEANS THAT YOU CANNOT BE
EVICTED BECAUSE OF THE CONVERSION. YOU MAY BE ELIGIBLE:

- (1) IF YOU ARE 62, OR WILL SOON BE 62, OR IF YOU ARE DISABLED; AND
- (2) IF YOU HAVE LIVED IN YOUR APARTMENT FOR AT LEAST ONE YEAR OR
IF THE LEASE ON YOUR APARTMENT IS FOR A PERIOD OF MORE THAN
ONE YEAR; AND
- (3) IF YOUR HOUSEHOLD INCOME IS LESS THAN _____ .
(insert current income figure)

IF YOU WISH THIS PROTECTION, SEND IN THE APPLICATION FORM BY
_____ TO THE _____
(insert date 60 days after municipality’s mailing)

(insert name and address of administrative agent/agency)
FOR FURTHER INFORMATION CALL THE ADMINISTRATIVE AGENT,

(insert administrative agency’s/agent’s phone number)

**IF YOU DO NOT APPLY YOU CAN BE EVICTED BY YOUR LANDLORD UPON
PROPER NOTICE.**

“NOTICE”

PROTECTED TENANCY FOR HUDSON COUNTY RESIDENTS

THE OWNER OF YOUR APARTMENT HAS NOTIFIED _____ OF HIS
(insert name of municipality)
INTENTION TO CONVERT TO A CONDOMINIUM OR COOPERATIVE. THE
LEGISLATURE HAS PROVIDED THAT, IF YOU ARE A RESIDENT OF A QUALIFYING
COUNTY, YOU MAY BE ENTITLED TO A PROTECTED TENANCY PERIOD.
PROTECTED TENANCY MEANS THAT YOU CANNOT BE EVICTED BECAUSE OF THE
CONVERSION. YOU MAY BE ELIGIBLE:

- (1) IF YOU HAVE LIVED IN YOUR APARTMENT FOR AT LEAST A YEAR; AND
- (2) IF YOUR HOUSEHOLD INCOME IS LESS THAN _____ .
(insert current income figure)

IF YOU WISH THIS PROTECTION, SEND IN THE APPLICATION FORM BY
_____ TO THE _____
(insert date 60 days after municipality’s mailing)

(insert name and address of administrative agent/agency)
FOR FURTHER INFORMATION CALL THE ADMINISTRATIVE AGENT,

(insert administrative agency’s/agent’s phone number)

**IF YOU DO NOT APPLY YOU CAN BE EVICTED BY YOUR LANDLORD UPON
PROPER NOTICE.**

Application for Senior and Disabled Protected Tenancy for all Residents and (Protected Tenancy for Hudson County Residents Only)

Check all that apply

- Check here if you are applying for Senior Citizen and Disabled Protected Tenancy Status
- Check here if you are applying for Protected Tenancy Status (Hudson County Residents only). **If you are 75 years of age or older or disabled, do not fill out Part B of this application. However, you must provide proof of age or disability.**

Part A (Personal Information)

Name of Applicant: _____

Date of Birth: _____

Name of Spouse, if residing in the household: _____

Spouse's Date of Birth: _____

Street Address: _____

Apartment number: _____

City: _____ State: _____

Zip Code: _____ County: _____

Home phone: _____ Work phone: _____

Name of Building or Project (if any): _____

Is this your principal place of residence: _____

If this is you principal residence on what date did you begin occupying it as your principal place of residence: _____

Are you disabled: _____

If you are disabled, please provide proof of disability.

Part B (Financial Information)

List each household member currently residing in the rental unit and provide the following information with respect to each household member including the applicant:

| Name | Age | Relation to Applicant | Income |
|------|-----|-----------------------|--------|
| | | | |
| | | | |
| | | | |
| | | | |

Provide proof of income for each household member

Total Household Income for the last full calendar year: _____

Amount of current monthly rent: _____

Additional charges paid by the tenant, please check all that apply:

_____ Heat

_____ Gas

_____ Electric

_____ Water

_____ Other, Please explain _____

Part C

Please mail the completed application along with the Tenant’s affidavit (T-5) and all supporting documents to the address listed below by (date)_____

(Insert address for the administrative agency)

If you require further information or assistance, contact: _____

(Insert phone number for the administrative agency)

Applicant's Name _____

Address _____

Telephone number _____

STATE OF NEW JERSEY :

COUNTY OF :

**Tenant's Affidavit in
Support of Application for
Protected Tenancy Status**

I _____, of full age, hereby declare:
(insert tenant applicant's name)

1. On _____ I received the "Protected Tenancy Packet" from the administrative agency for my municipality. The packet included and application and instructions for Senior Citizen and Disabled Protected Tenancy Status and/or Protected Tenancy Status for Hudson County residents, income eligibility figures, a "Notice" of intent to convert, a tenant's rights notice, a copy of N.J.S.A. 5:24-1 through 5:24-2.11 (or 5:24-3.4 for Hudson County residents only), comparable housing request and a tenant Notification form, that I have completed and returned to the owner/sponsor.
2. I consent to independent verification of information and documentation submitted to the administrative agency/agent by me in support of my application for protected tenancy status.
3. I certify that all information provided by me in support of my application for protected tenancy status is true and accurate to the best of my knowledge. I am aware that any statements made by me that are willfully false may be grounds for disqualification or termination of my protected tenancy status and subject me to penalties under the law.

Date

Applicant's Signature

Sworn and subscribed to
before me this _____ day
of _____ 20S__

Notary Public

Tenant Notification Requirement Form

I have received the Protected Tenancy Packet from the administrative agent for my municipality. I have or will be filing an application for Protected tenancy status under the:

Check all that apply

- Senior Citizen and Disabled Protected Tenancy Act
- Tenant Protection Act (for Hudson County)

Applicant's Name: _____

Street Address: _____

Apartment number: _____

City: _____ State: _____

Zip Code: _____ County: _____

Home phone: _____ Work phone: _____

Name of Building or Project (if any): _____

Date

Signature

Be sure to mail this form to:

(Owner/Sponsor insert your address here)

**LANDLORD-TENANT INFORMATION SERVICE
SENIOR CITIZENS AND DISABLED PROTECTED TENANT INCOME FIGURES**

| COUNTY | 2009 Applications | | 2010 Applications | |
|-------------------|------------------------------|-----------------------|------------------------------|-----------------------|
| | Per Capita Income | Maximum Income | Per Capita Income | Maximum Income |
| | Column A | Column B | Column C | Column D |
| Atlantic | \$ 37,498 | \$ 112,494 | \$ 37,048 | \$ 111,144 |
| Bergen | \$ 61,123 | \$ 183,369 | \$ 60,817 | \$ 182,451 |
| Burlington | \$ 44,455 | \$ 133,365 | \$ 43,922 | \$ 131,766 |
| Camden | \$ 39,669 | \$ 119,007 | \$ 39,193 | \$ 117,579 |
| Cape May | \$ 42,092 | \$ 126,276 | \$ 41,587 | \$ 124,761 |
| Cumberland | \$ 31,374 | \$ 94,122 | \$ 30,998 | \$ 92,994 |
| Essex | \$ 46,747 | \$ 140,241 | \$ 46,513 | \$ 139,539 |
| Gloucester | \$ 36,874 | \$ 110,622 | \$ 36,432 | \$ 109,296 |
| Hudson | \$ 37,903 | \$ 113,709 | \$ 37,713 | \$ 113,139 |
| Hunterdon | \$ 68,318 | \$ 204,954 | \$ 67,976 | \$ 203,928 |
| Mercer | \$ 51,380 | \$ 154,140 | \$ 51,123 | \$ 153,369 |
| Middlesex | \$ 46,058 | \$ 138,174 | \$ 45,828 | \$ 137,484 |
| Monmouth | \$ 52,782 | \$ 158,346 | \$ 52,518 | \$ 157,554 |
| Morris | \$ 67,665 | \$ 202,995 | \$ 67,327 | \$ 201,981 |
| Ocean | \$ 38,607 | \$ 115,821 | \$ 38,414 | \$ 115,242 |
| Passaic | \$ 38,250 | \$ 114,750 | \$ 38,059 | \$ 114,177 |
| Salem | \$ 36,009 | \$ 108,027 | \$ 35,577 | \$ 106,731 |
| Somerset | \$ 65,612 | \$ 196,836 | \$ 65,284 | \$ 195,852 |
| Sussex | \$ 45,938 | \$ 137,814 | \$ 45,708 | \$ 137,124 |
| Union | \$ 49,156 | \$ 147,468 | \$ 48,910 | \$ 146,730 |
| Warren | \$ 40,283 | \$ 120,849 | \$ 40,082 | \$ 120,246 |

The above figures are calculated pursuant to the Senior Citizens and Disabled Protected Tenancy Act (N.J.S.A. 2A:18-61.28). These figures are to be used by all administrative agents in the determination of "tenants annual household income." Columns A and B are to be used for all applications filed in 2009. Columns C and D are to be used for all applications filed after January 1, 2010 until new figures are promulgated by this Office.

"Tenant Annual Household Income" means the total income from all sources during the last full calendar year for all members of the household who resided in the dwelling unit at the time the tenant applied for SENIOR CITIZENS AND DISABLED PROTECTED TENANCY status, whether or not such income is subject to taxation by any taxing authority.

LANDLORD-TENANT INFORMATION SERVICEHUDSON COUNTY QUALIFYING INCOME FIGURES

The maximum qualifying income figures for the purpose of determining qualified tenant status under the "Tenant Protection Act of 1992" are as follows:

2010 Applications

| | |
|------------------------------|--------------------|
| <u>One Person</u> | <u>\$45,354.00</u> |
| <u>Two Persons</u> | <u>\$55,608.00</u> |
| <u>Three Persons</u> | <u>\$64,708.00</u> |
| <u>Four Persons</u> | <u>\$72,653.00</u> |
| <u>Five Persons</u> | <u>\$80,657.00</u> |
| <u>Six Persons</u> | <u>\$85,073.00</u> |
| <u>Seven Persons</u> | <u>\$89,550.00</u> |
| <u>Eight or More Persons</u> | <u>\$96,131.00</u> |

Qualified disabled tenants and tenants 75 years of age or older are eligible regardless of income.

Comparable Housing Request

Date:

Owner/Sponsor Name and Address

Re:

Dear Sir or Madam:

According to the condominium conversion regulations (N.J.A.C. 5:24-1.1 et seq.), since I have received a notice to quit due to my building being converted to a condominium, the landlord must provide me with comparable housing upon my written request. I understand that I must make my request for comparable housing within 18 months of receiving my three year notice to quit. Therefore, I hereby request that you offer me comparable housing and a reasonable opportunity to examine and rent said housing. Pursuant to the law, I am entitled to housing that is:

- 1) decent, safe, sanitary, and in compliance with all local and State housing codes;
- 2) open to all persons regardless of race, creed, national origin, ancestry, marital status, or sex; and
- 3) provided with facilities equivalent to those provided by the landlord in the dwelling unit in which I current reside with regard to:
 - a. apartment size including number of rooms;
 - b. rent range;
 - c. major kitchen and bathroom facilities; and
 - d. special facilities necessary for the handicapped and infirmed.
- 4) located in an area not less desirable than the area in which I currently reside with regard to:
 - a. accessibility to my place of employment;
 - b. accessibility to community and commercial facilities; and
 - c. environmental quality and conditions.

According to the law, I may request additional reasonable criteria for comparable housing. Therefore, I also request the following additional criteria:

I currently reside at:

Thank you.

Tenant's Signature