



Riverdale

Public School District

52 Newark-Pompton Turnpike
Riverdale, NJ 07457
Phone: 973-839-1300
FAX: 973-839-1024
<http://www.rpsnj.org>

Owner/Landlord Affidavit		
Owner/Landlord Information		
Last Name	First Name	
Address	Apt. #	
City	State	Zip
Home Phone	Alternate Phone	
Tenant Information		
Last Name	First Name	
Address	Apt. #	
City	State	Zip
Home Phone	Alternate Phone	
Leasing Information		
When did tenant(s) move in?	Relation to Renter:	<input type="checkbox"/> None
How long is the lease agreement?		<input type="checkbox"/> Family Member
		<input type="checkbox"/> Friend
Type of rental agreement:	<input type="checkbox"/> Yearly	<input type="checkbox"/> Month-to-Month
	<input type="checkbox"/> Rent-to-Own	
List Names of all Persons Living in the Above-Named Residence		
1.	6.	
2.	7.	
3.	8.	
4.	9.	
5.	10.	
<i>If applicable, please read and check:</i>		
<input type="checkbox"/> I am aware that said lease has additional family members residing in subject property.		
I attest that to the best of my knowledge the information is true and correct, and I am aware that fraudulent statements or claims may be prosecuted to the full extent of the law.		
Sworn and subscribed before me		
_____ day of _____, 20____.		

Signature of Owner/Landlord		

Date		
(A Notary Public of New Jersey)		