Date:		
Claim # H		

AFFIDAVIT IN SUPPORT OF APPLICATION AND OF SERVICE OF NOTICE ON TENANTS STATE OF NEW JERSEY

SS:

COUNTY OF HUDSON

Landlord's/Agent's Signature:

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

I further swear/affirm that I am the owner, or the legitimate representative of the owner and that I have been duly appointed to represent the owner in the processing of this Hardship Application.

I also swear/affirm that I have served notice of this application upon each of the tenants as required by Jersey City Municipal Code Chapter 260-10 and paid the required fees pursuant to 260-9D. I attach a true copy of said notice, and proof of service to each of the tenants.

I hereby swear/affirm that all the statements made by me and the documents provided are true.

Sundior d Syrigon S Signature.	
	Date:
Landlord's / Agent's Name:	
SWORN TO AND SUBSCRIBED On thisday of	
Personally appearedabove document.	who has satisfactorily identified himself/herself as the signer of the
Notary Public Print Name and Co	 mmission Expiration Date