



# Saddle Brook Public Schools

355 Mayhill Street, Saddle Brook, NJ 07663

Phone: 201-843-1142

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## Owner/Landlord Affidavit

Must provide a copy of the lease and proof of payment for rental property.

Landlord Information		Tenant Information:	
Landlord Name:		Name of Family:	
Street Address:		Street Address:	
City, State, Zip Code:		City, State, Zip Code:	
Telephone Number:		Telephone Number:	
Lease Information:			
Please specify the terms of the lease:			
When did the tenants move in? (Enter Date)		When does the lease expire? (Enter Date)	
List the names of all persons living in the apartment or house:			
Please upload this form to your child's Genesis Portal. If you have more than one child, please upload the form for each child. You must also provide a copy of the lease and proof of payment for rental 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 to and subscribed before me this:

\_\_\_\_\_ day of \_\_\_\_\_

\_\_\_\_\_  
Signature of Tenant

\_\_\_\_\_  
Date

\_\_\_\_\_  
Notary Public of New Jersey

\_\_\_\_\_  
Signature of Landlord

\_\_\_\_\_  
Date