



**BOROUGH OF FOLSOM
CONSTRUCTION OFFICE
1700 12TH STREET
FOLSOM, NJ 08037**

Phone: 609-561-3507

Fax: 609-561-5821

INSPECTION REQUEST FOR CERTIFICATE OF CONTINUED OCCUPANCY

PROPERTY LOCATION _____

BLOCK _____ LOT _____

APPLICANT _____ ADDRESS _____

PHONE NUMBER _____ CELL NUMBER _____

PRESENT OWNER _____ ADDRESS _____

PHONE NUMBER _____ CELL NUMBER _____

PROPOSED OWNER (TENANT) _____ ADDRESS _____

PHONE NUMBER _____

PRESENT USE _____ PROPOSED USE DESCRIBE IN DETAIL _____

NO. OF DWELLINGS _____ NO. OF BEDROOMS _____ NO. OF OCCUPANTS _____

OWNERSHIP (CIRCLE ONE): PRIVATE, PARTNERSHIP, CORPORATION, PUBLIC (GOVERNMENT)

HEATING SUPPLY _____ IS THE OWNER THE OCCUPANT? YES ___ NO ___

NO. SMOKE DETECTORS _____ NO. CARBON MONOXIDE DETECTORS _____ *****NOTE TO ALL APPLICANTS: SMOKE DETECTORS ARE REQUIRED IN EACH LEVEL OF RESIDENTIAL BUILDING INCLUDING BASEMENTS. *****

FIRE EXTINGUISHER – RESIDENTIAL ABC TYPE NO LARGER THAN 10 LBS INSTALLED WITHIN 10’ OF KITCHEN AREA, 5’ FROM THE FLOOR.

THE CONSTRUCTION OFFICE AND THE BOROUGH OF FOLSOM DOES NOT ASSUME ANY RESPONSIBILITY FOR OBTAINING TESTS FOR THE FOLLOWING:

*****WATER, SEPTIC AND TERMITE TESTING IS REQUIRED!! TEST RESULTS TO BE SUBMITTED TO THIS OFFICE TO OBTAIN CCO APPROVAL. *****

THIS SHALL BE THE RESPONSIBILITY OF THE SELLER OR BUYER TO OBTAIN ANY OR ALL OF THE ABOVE.

I HEREBY CERTIFY THAT I AM THE (AGENT FOR) THE OWNER OF RECORD AND AM AUTHORIZED TO MAKE THIS APPLICATION. I ALSO AGREE TO CONFORM TO ALL APPLICABLE LAWS OF THE TOWN OF FOLSOM.

APPLICANTS SIGNATURE _____ DATE _____

INSPECTOR’S SIGNATURE OR DESIGNEE _____ DATE _____

FEE: \$120.00 CHECK NO. _____ CASH _____ RECEIVED BY _____