

Residential Reoccupancy Inspection Application

INSTRUCTIONS:

Pursuant to §250-21 of the Vernon Township Code, before a 1- or 2-family residential dwelling is sold, leased or a change of occupancy occurs, the dwelling must be inspected. To ensure adequate time to schedule and complete the inspection, please begin this process **at least 20 days before** the sale/lease/change of occupancy is due to occur. First, contact the Vernon Township Department of Fire Prevention to request an inspection appointment. If personnel are out in the field, your call will be returned at which time your inspection will be scheduled. Second, complete this application. Note that on page three—titled “Residential Dwelling Reoccupancy Checklist”—you need only complete the questions in the column labeled “Owner.” The remainder of the checklist is to be completed by township personnel. Third, because the assessor’s portion must be completed prior to the onsite inspection, you will need to print out your completed application and bring it to the Vernon Township Division of Tax Assessments located in the municipal building at 21 Church Street. Finally, bring the application with you to your inspection appointment, along with a check or money order for the inspection fee. The final portion of the application form will be completed by the township’s inspector and, assuming the dwelling passes inspection, you will be issued a certificate of smoke detector and carbon monoxide alarm compliance (CSDCMAC).

Failure to obtain a CSDCMAC prior to a change of occupancy may delay the closing/reoccupancy and result in a financial penalty being assessed against the seller/lessor. The CSDCMAC is non-transferable and expires 6 months after the date of issuance.

The base application fee is \$55.00 + NJ Uniform Fire Code fee as follows:

- \$45.00— request received 15 business days or more prior to the change of occupancy
- \$75.00— request received five to 14 business days prior to the change of occupancy
- \$125.00— request received four business days or less prior to the change of occupancy

Owners of monitored alarm equipped residential premises must submit current test report from their alarm company and be able to reset/operate the system.

Battery or plug-in carbon monoxide alarms must be installed within 10 feet of every separate sleeping area. The ABC type residential fire extinguisher must be mounted in accordance with New Jersey Division of Fire Safety instructions.

The seller/owner will be notified if a discrepancy/violation requiring correction is found during the review or inspection. Any discrepancies/violations and the requirements for correction must be disclosed to the buyer.

Residential Reoccupancy Inspection Application

Continued page 2 of 3

Municipality: <input type="checkbox"/> Vernon Township <input type="checkbox"/> Wantage Township		Application Date:		
Property Address		Block	Lot	Qualifier
Transaction type (choose one): <input type="checkbox"/> Sale <input type="checkbox"/> Rental/Lease		Proposed closing/reoccupancy date:		

INFORMATION ABOUT THE PARTIES TO THIS TRANSACTION	
Owner's Name	Duration of Ownership
Owner's Mailing Address	Owner's Telephone #
Owner's Attorney/Real Estate Agent	Owner's Attorney/Agent Telephone #
Owner's Attorney/Real Estate Agent Address	
Buyer/Tenant	

I hereby certify that I understand it is the **owner's** responsibility under N.J.A.C. 5:70-2.3 to obtain the certificate of smoke detector and carbon monoxide alarm compliance (CSDCMAC) before the sale or reoccupancy of these premises. I hereby certify that I am acting on behalf of and with the permission of the owner to apply for this inspection.

Owner's/Applicant's Signature	Date
_____	_____

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Continued page 3 of 3

Residential Dwelling Reoccupancy Checklist

Owner's Name			
Property Address	Block	Lot	Qualifier

	Owner	Assessor	Inspector
Finished basement	<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> YES <input type="checkbox"/> NO
Type of heat (gas, oil, electric)			
Number of bathrooms			
Whirlpool bathtub (Jacuzzi)	<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> YES <input type="checkbox"/> NO
Wood, gas or pellet stove (heating)			
Has the water heater been replaced during your ownership?	<input type="checkbox"/> YES <input type="checkbox"/> NO		
Has the furnace/boiler been replaced during your ownership?	<input type="checkbox"/> YES <input type="checkbox"/> NO		
The following questions are not applicable to condominiums			
Deck size			
Shed square footage			
Above ground pool, in-ground pool, hot tub			
Attached garage	<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> YES <input type="checkbox"/> NO
Detached garage	<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> YES <input type="checkbox"/> NO
Central air conditioning	<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> YES <input type="checkbox"/> NO
Exterior finish (vinyl, brick, wood)			
Outdoor furnace	<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> YES <input type="checkbox"/> NO

Owner's Signature		Assessor's Signature		Inspector's Signature	
Date		Date		Date	

OFFICIAL USE ONLY—DO NOT WRITE BELOW THIS LINE		
Date Application Rec'd:	Business days before occupancy: <input type="checkbox"/> > 10 <input type="checkbox"/> 4- 10 <input type="checkbox"/> < 4	
Amount Paid: \$	Receipt #:	Check/MO #:
BUILDING DEPARTMENT Open permits and/or penalties:	Sign/Date:	
ZONING DEPARTMENT Shed under 100 sq. ft: <input type="checkbox"/> Permit has been issued <input type="checkbox"/> Permit not required	Sign/Date:	
Actions required:		