



# Application for Certification in Lieu of Inspection

## Smoke Alarms, Carbon Monoxide Alarms, Portable Fire Extinguisher and Sump Pump Compliance

Property Address: \_\_\_\_\_ Block: \_\_\_\_\_ Lot: \_\_\_\_\_  
 Millington       Stirling       Gillette       Meyersville       Homestead

**HOME SALE:** Complete for all one and two-family residential HOME SALES with or without occupancy:

Current Owner/Seller:	Phone:
Home Address of Owner/Seller:	
Name of Buyer:	Closing Date:
Please Indicate (circle one):      Single Family      2-Family      3+ Residence	

**LEASE/RENTAL:** Complete for all CHANGES IN OCCUPANCY/RENTAL TENANCY more than 6 months apart:

Landlord/Owner:	Phone:
Home Address of Landlord/Owner:	
New Tenant Name:	Date of New Tenancy:

**REALTOR/AGENT OR APPLICANT (IF OTHER THAN OWNER):**

Name & Title:	
Agency & Address:	
E-Mail:	Phone:

**NOTE: CHECK ALL BOXES THAT APPLY - MUST BE COMPLETE FOR APPROVAL OF CERTIFICATION**

**GUIDANCE:** AN INSPECTION SHALL BE CONDUCTED BY THE OWNER OR AN AUTHORIZED REPRESENTATIVE OF THE OWNER. THE SMOKE ALARMS REQUIRED SHALL BE LOCATED IN ACCORDANCE WITH NFPA 74; THE CARBON MONOXIDE ALARMS SHALL BE INSTALLED PER NFPA 720. IN CASES WHEREIN THE BATTERY POWERED ALARMS ARE ACCEPTABLE, SMOKE ALARMS MUST BE OF THE 10-YEAR SEALED BATTERY TYPE. AC ELECTRIC POWERED AND/OR INTERCONNECTED ALARMS AND SMOKE DETECTORS INSTALLED IN HOMES CONSTRUCTED AFTER JANUARY 1977 SHALL BE MAINTAINED IN WORKING ORDER. THE PORTABLE FIRE EXTINGUISHER SHALL BE INSTALLED PER P.L. 2005, C71 (N.J.S.A. 52:27D-198 SEQ.). FOR ASSISTANCE CALL (908) 647-8000, EXT 307.

- Compliant smoke alarms are on each level of the dwelling, including basements, excluding unoccupied attics or crawl spaces
- Compliant smoke and carbon monoxide alarms are outside each separate sleeping area and within ten feet of all bedrooms
- All smoke alarms and carbon monoxide alarms have been tested and are all in working order
- Portable fire extinguisher is in proper size and type and is properly mounted within ten feet of the kitchen
- No sump pumps exist at the location
- One or more sump pumps exist at the location
- No sump pumps are connected to the sanitary waste lines (COMPLIANT)
- One or more sump pumps are connected to the sanitary waste lines (NON-COMPLIANT)

MAIL CERTIFICATE TO: \_\_\_\_\_ PHONE: \_\_\_\_\_  
\_\_\_\_\_ EMAIL CERTIFICATE TO: \_\_\_\_\_

**ENDORSEMENT:** I do hereby certify that the foregoing statements made by me are true. I am aware that if any of the foregoing statements made by me are willfully false, I will be subject to penalties under the law.

APPLICANT (print name, sign & date): \_\_\_\_\_

WITNESS (print name, sign & date): \_\_\_\_\_

Once issued, a Certificate is not transferable, nor is a fee refundable. If the sale or change in tenancy does not occur within 6 months from the date of issuance, a new application shall be required.

Please return the completed form with check/payment to: "Township of Long Hill". 915 Valley Road, Gillette, NJ 07933  
If date of receipt is more than 10 business days prior to closing date the fee is \$100. If date of receipt is 4 to 10 business days prior to closing date the fee is \$140. If date of receipt is less than 4 business days prior to closing date the fee is \$211.

**\* FOR OFFICE USE ONLY \***

DATE RECEIVED: \_\_\_\_\_ LOG #: \_\_\_\_\_ PMT #: \_\_\_\_\_ FEE PAID: \_\_\_\_\_  
CHECK/MONEY ORDER #: \_\_\_\_\_ CREDIT CARD: \_\_\_\_\_ CASH: \_\_\_\_\_  
CERTIFICATE IS: [ ] APPROVED [ ] DENIED COMMENTS: \_\_\_\_\_  
CERTIFICATE ISSUED BY (print name, title, signature & date): \_\_\_\_\_