



Commercial Certificate of Occupancy

Township of Lakewood Department of Inspections

212 4th Street Lakewood, NJ 08701

732-364-3760

Fee: \$150.00

Reinspection Fee: \$55.00

Cash: _____ Check#: _____ CC: _____

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Address to be Inspected: _____ Unit#: _____

Block: _____ Lot: _____ Zone: _____ Use Group: _____

Name of Business: _____

Email: _____

Description of Proposed Use: _____

Mailing Address of Occupant: _____

Business Phone Number: _____ Cell Phone: _____

Previous Tenant/Previous: _____

Name of Building Owner: _____ Owners Business Phone: _____

Address of Building Owner: _____

Property Owner: _____ Signature: _____

Business Owner: _____ Signature: _____

For Official Use Only

Use if Conforming: Yes ☐ No ☐

Zoning Officer: _____

Francine Siegel, Zoning Officer

Approved: Date: _____ Inspector: _____

Denied: Date: _____ Inspector: _____

Certificate of Occupancy Approval: _____

Jeremy Kuipers, Construction Official

CCO Sticker#: _____