

BOROUGH OF HADDON HEIGHTS

Zoning and Code Enforcement

514 W. Atlantic Avenue, Haddon Heights, NJ 08035

Phone: 856-546-2580 Fax 856-546-2584

As per Ordinance 2018:1453 it is required to apply for and receive a Certificate of Compliance issued by the Code Enforcement Officer

Please consider the following when applying for your certificate:

- No application can be filed without a settlement date
- All fees must be paid before scheduling an inspection

§262.2.1. Exceptions; Failed Inspections:

- Upon receipt of purchaser's agreement and acceptance by Enforcement Officer, properties may close and/or be occupied without a certificate while violations are being abated. No such agreement shall exceed 90 days.

Fees:

- Filing for the application: \$11.00
- First inspection: \$50.00
- Second inspection: no charge
- Third or more inspection: \$25.00

Return Completed Form and Payment to 514 W Atlantic Avenue, Haddon Heights, NJ 08035

Please be aware that this inspection is **DIFFERENT** from the inspection the Fire Department conducts. You will need **BOTH** certificates in order to close. Please contact the Fire Department for more information and scheduling at 856-547-7164, ext. 80

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TODAY'S DATE: _____

SETTLEMENT DATE: _____

PROPERTY ADDRESS: _____

HOMEOWNERS NAME: _____

CONTACT PHONE NO. (HOME): _____

HOMEOWNERS CELL NO.: _____

REALTOR: _____

CONTACT NAME: _____

ADDRESS: _____

PHONE NUMBER: _____

CELL NUMBER: _____

EMAIL ADDRESS: _____

I hereby certify that I have read all of the conditions on the front page of this application. I am aware that I am responsible for scheduling any and all inspections or re-inspections. I am authorized to make this application as either the buyer, seller, or agent of.

Signature of Applicant: _____ Date: _____

DO NOT WRITE BELOW THIS LINE, OFFICE USE ONLY

Fee Due: \$11.00 _____ \$50.00 _____ \$25.00 _____

Date Received: _____ Received by: _____

Payment Type: _____ Re-Inspection: _____

○ Check # _____

Check # _____

○ Cash _____

Cash _____

Brian Kelly

Code Enforcement Officer _____ Date: _____