

Borough of Rockleigh
Construction Office
26 Rockleigh Road
Rockleigh, New Jersey 07647
201-768-4217

**Application for Certificate of
Resale/Rental Residential Property**

BLOCK: _____ LOT: _____

PROPERTY OWNER NAME: _____

OWNER ADDRESS: _____

OWNER PHONE NUMBER: _____

BUYER OR RENTER (CIRCLE ONE)

NAME: _____

ADDRESS: _____

PHONE NUMBER: _____

CONTACT INFORMATION FOR DAY OF INSPECTION:

NAME: _____ PHONE NUMBER: _____

PLEASE NOTE:

Inspections are conducted Monday through Friday between 9 a.m. and 5 p.m. The fee for the inspection / CCO issuance is \$150.00. Please make check payable to the Borough of Rockleigh.

OFFICIAL USE ONLY

FEE: _____ CHECK #: _____ DATE RECEIVED: _____ RECIEVED:BY: _____

INSPECTION DATE & TIME: _____