

BOROUGH OF TOTOWA

PASSAIC COUNTY, NEW JERSEY

ALLAN BURGHARDT
CONSTRUCTION CODE OFFICIAL
BUILDING SUBCODE OFFICIAL
ZONING OFFICER



MUNICIPAL COMPLEX
537 TOTOWA ROAD
TOTOWA, N.J. 07512
973-956-7929

DWELLING CERTIFICATE

PROPERTY ADDRESS _____

BLOCK _____ LOT _____

SINGLE FAMILY _____

TWO FAMILY _____

MULTIPLE FAMILY _____

CURRENT OWNER

NAME _____

ADDRESS _____

CITY & STATE _____

HOME PHONE _____ WORK OR CELL _____

NEW OWNER OR TENANT

NAME _____

CURRENT ADDRESS _____

CITY & STATE _____

HOME PHONE _____ WORK OR CELL _____

FLOOR TO BE OCCUPIED _____ DATE TO BE OCCUPIED _____

CONTACT PERSON FOR INSPECTION _____

TELEPHONE # _____

THE INSPECTION MUST PROVIDE ACCESS TO THE ENTIRE STRUCTURE & PROPERTY AS
REQUIRED BY LAW.

TO BE COMPLETED BY BUYER _____

Number of Adult Occupants _____

Husband's Name _____

Wife's Name _____

Single Adults _____

Relationship of Occupants _____

TENANT _____

Number of Children _____

Name _____ Age _____

Name _____ Age _____

Name _____ Age _____

Name _____ Age _____

Name _____ Age _____

Name _____ Age _____

We certify that all the foregoing statements are true. We are aware that if any of the foregoing statements made by us are willfully false, we are subject to punishment.

New Buyer/Tenant

Date

Current Owner

Date

Realtor

Realtor's Name & Address (PLEASE PRINT)

Phone Number

BOROUGH OF TOTOWA

PASSAIC COUNTY, NEW JERSEY



BUREAU OF FIRE PREVENTION
537 TOTOWA ROAD
TOTOWA, N.J. 07512

FIRE BUREAU APPLICATION SMOKE DETECTOR - CARBON MONOXIDE Please Print

PROPERTY ADDRESS: _____

Block # _____, Lot # _____

Current Owner's Name and
Address: _____

Phone # _____

New Buyer's/Tenant Name and
Address: _____

Phone # _____

Number of Adults _____

Number of Children _____

Husband's Name _____

Name _____ Age _____

Wife's Name _____

Name _____ Age _____

Single Adult _____

Name _____ Age _____

Name _____ Age _____

We Certify that all the foregoing statements are true. We are aware that if any of the foregoing statements made by us are willfully false, we are subject to punishment.

Date _____ Current Owner

Date _____ New Buyer/Tenant

NO CLOSING IS TO TAKE PLACE WITHOUT THE COMPLETED CERTIFICATE OF INSPECTION!

FOR OFFICIAL USE ONLY

Cert # _____ Date Received _____

\$ _____ Check # _____