

Bureau of Fire Prevention**Fire Marshal**

Ryan Pinnella -

Fire Inspector

Steven Webb

Nicholas Mattiello

**Township of Montgomery**

100 Community Dr.

Skillman, NJ 08558

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**APPLICATION FOR CERTIFICATION OF SMOKE DETECTOR, CARBON
MONOXIDE ALARM & SECONDARY POWER SOURCE IDENTIFICATION**
(PLEASE PRINT NEATLY OR TYPE)

Location to be Inspected Information – Contact and Building Information

Block:	Lot:	Dwelling Use: ☐ Single Family ☐ 2 Family ☐ Townhouse/Condo	
Address:			
City, State, Zip:			
Owner Name:		Phone:	
Owner Address (If Different):			
Date of Closing/Leased on:	# of Stories:	# of Bedrooms	Basement Finished: ☐ Yes ☐ No
Realtor Agent Name:		Realtor Phone:	

I hereby apply for a **Certification of Smoke Alarm, Carbon Monoxide Alarm & Secondary Power Source Identification (CSACMASPSI)** for the above residential property in Montgomery Township. I understand that a satisfactory inspection must be performed by the **Montgomery Township Fire Prevention Bureau** prior to the issuance of the CSACMASPSI per N.J.A.C. 5:70-2.3 and that is a violation of **STATE LAW** if ownership or occupancy changes prior to the issuance of a CSACMASPSI.

I hereby certify that the information contained herein is correct. I understand that any false statements will result in the revocation of the certificate and the issuance of penalty notices up to \$500.00 per N.J.A.C. 5:70-2.12, plus an additional \$500.00 per N.J.A.C. 5:70-2.12(a).

Applications must be completed in full and presented in person at the Municipal Building (Construction Office)

**Inspection are Tuesdays and Thursdays 8:30am-11:30am
& 12:30pm-3:00pm / Wednesdays 8:30am-11:30am**

Signature of Applicant _____

OFFICE USE ONLY

<u>1st Inspection</u>	<u>2nd Inspection</u>	<u>3rd Inspection</u>
Date Paid: _____	Date Paid: _____	Date Paid: _____
Chk#/Cash: _____	Chk#/Cash: _____	Chk#/Cash: _____
Inspection Date: _____	Inspection Date: _____	Inspection Date: _____
☐ AM ☐ PM ☐ Pass ☐ Fail	☐ AM ☐ PM ☐ Pass ☐ Fail	☐ AM ☐ PM ☐ Pass ☐ Fail

Deficiencies: _____

Certificate #

Fire Marshal/Fire Inspector

Montgomery Township Fire Prevention Bureau
100 Community Dr.10/31/25
Skillman, NJ 08558

Before any one- and two-family or attached single-family structure is sold, leased or otherwise made subject to a change of occupancy for residential purposes, the owner shall obtain a certificate of smoke alarm, carbon monoxide alarm and secondary power source identification (CSACMASPSI). The application fees for CSACMASPSI, as required by N.J.A.C. 5:70-2.3, shall be based upon the amount of time remaining before the change of occupancy is expected as follows:

1. Requests for CSACMASPSI received **more than 10 business days** prior to change of occupancy shall be **\$65.00**.
2. Requests for CSACMASPSI received **4-10 business days** prior to the change of occupancy shall be **\$125.00**.
3. Requests for CSACMASPSI received **fewer than 4 business days** prior to the change of occupancy shall be **\$185.00**.

Any **re-inspection** shall be an **additional \$65.00**. A **no show** inspection shall be subject to a **\$65.00 fee**.

A no-show inspection means:

1. The owner/agent fails to meet inspector within the appointed time for inspection or re-inspection;
2. The owner/agent does not have a key or is unable to give the Fire Official access to the premises for the scheduled inspection or re-inspection; or
3. Electrical power to a premise is disconnected and smoke detectors to be tested are powered by electrical current from the building wiring system.

All inspections **WILL** be inspected **ONLY** by an inspector from the Montgomery Township Fire Prevention Bureau.

Visit our website for detailed information on the inspection requirements at:

www.montgomerynj.gov/fire