CITY OF ABSECON
Municipal Complex
500 Mill Road
Absecon, New Jersey 08201
P:609-641-0663 ex 113

C.C.O#_____

Application for One and Two Family Dwelling
Certification of Smoke Alarm, Carbon Monoxide Alarm and Portable Fire Extinguisher Compliance

Dwelling Location: Block_____ Lot_____
Street Address_____
I, _____ Certify that the dwelling at the above referenced location has smoke alarms installed and are in working order as stated below;

( ) **1978 and before** All one and two family dwelling constructed before **1978** must have **10- Year Sealed Battery** smoke alarms located on each level of the structure and outside each separate sleeping area in the immediate vicinity of the bedrooms.
( ) **1979 to 1987** One and Two family dwelling was constructed between **1979 and 1987,** AC Powered smoke alarms are required in the immediate vicinity of each sleeping area and in the basement area. 10- Year Sealed Battery powered smoke alarms **SHALL** be added to meet the new requirement for each level of the structure. The smoke alarms located outside each sleeping area(s) and the basement **MUST BE AC POWERED UNITS.**
( ) **1987 TO 1991** One or two family dwelling was constructed between **1987 and 1991,** AC Powered interconnected smoke alarms are required on each level of the structure and outside each sleeping area in the immediate vicinity of the bedrooms. ALL SMOKE ALARMS MUST BE AC POWERED AND INTERCONNECTED UNITS. IF ONE ALARM ACTIVATES ALL ALARMS SOUND AN ALARM.
( )**1991 to Present** One or two family dwelling was constructed between **1991 to Present,** AC Powered Interconnected units with battery backup must be installed in all bedrooms, outside each sleeping area, and on every level of structure.
NO EXCEPTIONS
( ) **All smoke alarms are in working order.**
( ) **Carbon Monoxide Alarm installed in immediate vicinity of the sleeping area(s).** Carbon monoxide alarms may be battery operated, hard wired or plug in type and shall be listed and labeled in accordance with UL-2034 an installed per N.J.A.C. 5:70-4.19 and NFPA-720.
( ) **Portable Fire Extinguisher 2 ½ to 10lbs. ABC Dry Chemical within 10 feet of the kitchen, mounted no higher than 5 foot high and visible.**

This inspection shall be conducted by the owner or an authorized representative of the owner.
Email address Certificate is to be sent to:_____
Phone#:_____ Fax#_____

I do hereby certify that the foregoing statements made by me are true. I am aware if any of the forgoing statements made by me are willfully false, I will be subject to a penalty.
Sworn and Subscribed to me this___ Day of, _____ 20____

_____ _____
Notary Signature Applicants Signature

_____
Printed Name

Fee: $75