

Borough of Elmer

HOUSING, ZONING, & PROPERTY MAINTENANCE OFFICE

120 S. Main Street, PO Box 882, Elmer, NJ 08318

(856) 358-4010 Ext. 114 (856) 358-4870 fax zoninghousing@elmerboroughnj.com www.elmerboroughnj.com

APPLICATION FOR CERTIFICATE OF OCCUPANCY

Address for Inspection _____ Block _____ Lot _____

Owner/Seller Name _____ Phone (____) _____

Owner/Seller Mailing Address _____ City/State/Zip _____

Buyer/Tenant Name _____ Phone (____) _____

Realtor _____ Phone (____) _____
For Buyer For Seller

Responsible Contact Name _____ Phone (____) _____

Address _____ City/State/Zip _____ Email _____

Resale _____ Rental _____ If Rental, Landlord Registration is Completed _____

Settlement/Occupancy Start Date _____ Rental/Lease Length _____

Dwelling Information: Single Family _____ Multi-Family _____ Apt/Duplex _____

Bedrooms _____ # Maximum Occupants _____ # Baths _____

Year Built _____ Basement: YES _____ NO _____ Finished: YES _____ NO _____

Full Names/Ages of all Proposed Occupants (including children):

Name:	Age:	Name:	Age:

Pets: Dogs _____ Cats _____ (all pets must be licensed)

I certify that I have read the Elmer Borough Certificate of Occupancy Guidelines for Inspections checklist and understand all of its requirements.

Applicant Signature _____ Date _____

Inspection Fee: \$50 (includes Initial and 1 Re-inspection)

Additional Re-Inspections Fee: \$25

Make checks payable to: **Borough of Elmer**

****Real Estate Taxes must be paid to date before any certificate is issued and Landlord Registration must be current (if applicable)****

CO APPLICATION VOID AFTER 30 Days

FOR OFFICE USE ONLY

Inspection Fee _____

Received By _____

Date Received _____

Cash _____ Check # _____

Date Inspected _____

CO# _____

Re-Inspection Fee _____

Received By _____

Date Received _____

Cash _____ Check # _____

Date Re-Inspected _____