

APPLICATION, CHECKLIST and AFFIDAVIT
FOR RESIDENTIAL, RENTAL, RESALE
CERTIFICATE OF INSPECTION(COI)

FEE \$250

**CERTIFICATE OF INSPECTION
TOWNSHIP OF MILLSTONE
CONSTRUCTION DEPARTMENT**

**470 STAGECOACH RD
732-917-2953 FAX 609-208-2083**

BLOCK _____ LOT _____ SURVEY _____

ADDRESS OF PROPERTY: _____

PROPERTY OWNER: _____

ADDRESS OF OWNER _____

PHONE # _____ APPROX. DATE OF CLOSING: _____

PERSON TO CONTACT PHONE # _____

EMAIL ADDRESS _____

AGENT INFORMATION _____

OWNER SIGNATURE **X**

REASON FOR CHANGE OF OCCUPANCY:

RESIDENTIAL/ COMMERCIAL: RENTAL _____ RESALE _____

FOR OFFICE USE ONLY

INSPECTION DATE:

() BUILDING [P/F] () FIRE [P/F] () ELECTRICAL [P/F] () PLUMBING [P/F]

CN # _____ PERMIT # _____

DATE PAID _____ CHECK _____ CREDIT CARD _____ OTHER _____

FEES RECEIVED BY _____

CONSTRUCTION OFFICIAL _____ DATE _____

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COPY OF SURVEY MUST BE INCLUDED WITH ALL APPLICATIONS

PERMIT IS TO BE FILLED OUT AND EXECUTED, UNDER OATH, BY EACH OWNER OF RECORD OF THE PROPERTY, IN THE PRESENCE OF ONE AUTHORIZED TO TAKE OATHS IN N.J (Generally a Notary Public or Attorney at Law of N.J.). ** ALLOW APPROXIMATELY TWENTY (20) BUSINESS DAYS TO COMPLETE THE CERTIFICATE PROCESS **.

MILLSTONE TOWNSHIP FIRE DEPT 609-259-2560: INSPECTION REQUIRED ON **ALL** RESIDENTIAL RESALE AND RENTALS. FIRE DEPARTMENT CERTIFICATE IS REQUIRED BEFORE FINAL COI CERTIFICATE IS ISSUED. FORWARD COPY OF FIRE CERTIFICATE TO CONSTRUCTION@MILLSTONENJ.GOV. PUT ADDRESS IN SUBJECT AREA.

MONMOUTH COUNTY BOARD OF HEALTH: INSPECTION REQUIRED ON **ALL** RESIDENTIAL RENTAL PROPERTIES AND RENTAL /RESALE COMMERCIAL PROPERTIES. 732-431-7456.

BEFORE RESIDENTIAL PROPERTY IS RENTED, WE MUST HAVE IN OUR FILE, MONMOUTH COUNTY HEALTH DEPARTMENT CERTIFICATE (WELL & SEPTIC APPROVAL) & FIRE DEPT. CERTIFICATE & LANDLORD REGISTRATION. LEAD CERTIFICATE IS REQUIRED IF HOUSE BUILT BEFORE 1978.
NO INSPECTIONS WILL BE SCHEDULED UNLESS ALL ABOVE ITEMS ARE RECEIVED

HOUSE NUMBERS: MUST BE 3" REFLECTIVE AND BE POSTED WITHIN 10 FEET FROM ROAD/STREET, WRITTEN WORDS ARE NOT ACCEPTABLE.

STEPS & LANDINGS OPEN PORTION OF A STAIR, LANDING OR BALCONY WHICH IS MORE THAN 30" (THIRTY INCHES) ABOVE THE FLOOR OR GRADE SHALL HAVE GUARD RAILS. STAIRS MUST BE IN SOUND AND GOOD CONDITION.

RAILINGS HANDRAILS AND GUARDRAILS SHALL BE FIRMLY FASTENED AND CAPABLE OF SUPPORTING NORMALLY IMPOSED LOADS AND SHALL BE MAINTAINED IN GOOD CONDITION. **(WHERE REQUIRED)**

WASHER/DRYER MUST DISCHARGE INTO A DRAINAGE SYSTEM, NOT ON THE GROUND OR INTO A SUMP PUMP. DRYER MUST BE VENTED TO THE EXTERIOR WITH A METAL PIPE OR FOIL FLEX FROM THE MACHINE.

GARBAGE DISPOSALS NOT ALLOWED.

HVAC UNITS MUST BE OPERATIONAL AND CONNECTED TO A THERMOSTAT. AREA AROUND UNITS MUST BE FREE AND CLEAR OF STORAGE AND/OR DEBRIS.

GARAGE DOOR FROM HOUSE TO THE GARAGE MUST BE MAINTAINED IN OPERATIVE CONDITION. **THERE MUST NOT BE ANY EXTENSION CORDS HOOKED UP TO THE GARAGE DOOR OPENERS.**

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- FIREPLACE CHIMNEY CAPS ARE REQUIRED AND FOR ALL WOOD BURNING FIREPLACES, AT LEAST A LEVEL 1 INSPECTION IS REQUIRED BY A CERTIFIED CHIMNEY SWEEP.
- ROOF NO LEAKS, NO MISSING SHINGLES, NO EXCESSIVE CURLING
- STOVE/RANGE MUST BE OPERATIONAL WITH KNOBS AND HARDWARE
- FLOORS SMOOTH AND FREE OF TRIPPING HAZARDS
- PLUMBING FIXTURES SHALL BE PROPERLY INSTALLED, CONNECTED AND MAINTAINED IN WORKING ORDER. WATER HEATER MUST BE IN WORKING ORDER.
- ELECTRICAL ALL RECEPTACLES (OUTLETS), SWITCHES AND JUNCTION BOXES MUST BE PROPERLY COVERED. EXTENSION CORDS ARE NOT PERMITTED. A CLEAR AND UNOBSTRUCTED PATH TO THE PANEL BOX, OPEN SLOTS MUST BE PROPERLY BLOCKED AND SERVICE CABLE MUST BE IN GOOD CONDITION.
THERE MUST NOT BE ANY EXTENSION CORDS HOOKED UP TO THE GARAGE DOOR OPENERS.
- GFI PROTECTION REQUIRED FOR:**
ALL KITCHEN COUNTERS **GFI** - 6' FROM ANY SINK
ALL BATHROOMS
BASEMENT (UNFINISHED)
ALL INCANDESCENT LAMPS IN CLOTHES CLOSETS MUST HAVE SEALED LENSES
GARAGE (BELOW 6' 8")
EXTERIOR OF BUILDING
WHIRLPOOL TUBS & HOT TUBS MUST BE GFI PROTECTED
- YARD & PROPERTY CLEAN AND FREE OF DEBRIS, LAWNS AND LANDSCAPING MAINTAINED.
- GENERAL CONDITIONS WALLS, CEILING, TRIM, PAINT, SIDING AND FENCES MUST BE IN GOOD AND SOUND CONDITION.
- FENCE/POOL IF THERE IS AN INGROUND POOL ON THE PROPERTY THE FENCE MUST MEET POOL CODE. ISPSC SECTION 305 IN THE CODE BOOK. TOP OF FENCE SHALL BE 48 INCHES ABOVE GRADE. VERTICAL CLEARANCE BETWEEN GRADE AND BOTTOM OF FENCE SHALL NOT EXCEED 2 INCHES FROM GRADE OF NON-SOLID SURFACES. (EX. STONE, MULCH) ON SOLID SURFACE SHALL NOT EXCEED 4 INCHES. THE GATES OF POOL AREA MUST OPEN OUTWARD AWAY FROM POOL AND MUST BE SELF CLOSING WITH A SELF LATCHING DEVICE. THE LATCHES MUST BE 54 INCHES ABOVE GRADE AND SHALL REMAIN LOCKED WHEN NOT IN USE.

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BLOCK: _____ LOT: _____

PROPERTY ADDRESS: _____

AFTER REVIEWING THE ABOVE LIST, ANSWER THE QUESTIONS BELOW.

1. DO YOU HAVE A FINISH BASEMENT WITH OR WITHOUT BATHROOM AND ALL PERMITS? **(Y/N) IF “YES” CONTACT CHRIS LUBERTO MONMOUTH COUNTY HEALTH DEPARTMENT (732-431-7456 X7496).**
2. DO YOU HAVE A GENERATOR WITH ALL PERMIT? **(Y/N)**
3. DO YOU HAVE ANY ACCESSORY STRUCTURE(S) WITH ZONING AND PERMITS IF REQUIRED? **(Y/N)**
4. DO YOU AGREE TO BE BOUND BY THE FOLLOWING PROVISIONS? **(Y/N)**
5. OWNER(S) ACCEPTANCE

a.) Owner(s) agree to release, indemnify, defend and hold harmless the Township of Millstone, its agents, officers and employees, from and against any and all claims, demands, losses, expenses, attorney fees, causes of action, judgments, lawsuits, proceedings, damages, and liability which may be asserted or claimed and which relate in any way to, or arise or result in any way from allowing the use of this form and procedure, or from any acts, misstatements, false statements or omissions (accidental or purposeful) of the Owner (s), its/their agents, officers and employees.

b.) Owner(s) understand that the filing of this statement with the Township is an accommodation in order to expedite the issuance of Certificates of Inspection. The Owner(s) have diligently inspected the property, or had it inspected by the appropriate professional(s) and take responsibility for the accuracy of and compliance with each standard/statement listed anywhere on this form.

c.) **COMMENTS:**

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I/WE, BEING OF FULL AGE DO HERBY CERTIFY AND SAY, UNDER OATH, THAT
ALL OF THE FORGOING IS ACCURATE AND COMPLETE.

Owner Signature

Owner Name (Print)

Owner Signature

Owner Name (Print)

PROPERTY ADDRESS

ACKNOWLEDGMENT

STATE OF _____ :

:

SS COUNTY OF _____ :

I CERTIFY that on _____ 20_____, _____,
personally, came before me and acknowledged under oath, to my satisfaction, that he/she:

- (a) is named in and personally signed this document; and
- (b) signed, sealed, and delivered this document as his/her act and deed.

NOTARY PUBLIC OF THE STATE OF
NEW JERSEY

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6. BUYER/TENANT(S) ACCEPTANCE

- a.) Buyer/Tenant(s) agree to release, indemnify, defend and hold harmless the Township of Millstone, its agents, officers and employees, from and against any and all claims, demands, losses, expenses, attorney fees, causes of action, judgments, lawsuits, proceedings, damages, and liability which may be asserted or claimed and which relate in any way to, or arise or result in any way from allowing the use of this form and procedure, or from any acts, misstatements, false statements or omissions (accidental or purposeful) of the Buyer/Tenant (s), its/their agents, officers and employees.
- b.) Buyer/Tenant (s) understand that the filing of this statement with the Township is an accommodation in-order to expedite the issuance of Certificates of Inspection. The Buyer/Tenant(s) have diligently inspected the property, or had it inspected by the appropriate professional(s) and take responsibility for the accuracy of and compliance with each standard/statement listed anywhere on this form.
- c.) **COMMENTS:**
