



TOWNSHIP OF MILLSTONE
Construction Department
County of Monmouth

470 Stagecoach Road
Millstone Township, NJ 08510
Phone (732) 917-2953
Fax (609) 208-2083

I UNDERSTAND THAT WHEN A PERMIT IS ISSUED FOR:

Address: _____

Block: _____ Lot: _____

Type of work: _____

I will be responsible for requesting all required inspections for work permitted at the above address in accordance with N.J.A.C. 5:23-2.18.

I further understand that failure to call for all required inspections will make me liable for a monetary penalty in accordance with N.J.A.C. 5:23-2.31.

Failure to notify this office of the completion of the above-mentioned project will subject you to a monetary penalty in accordance with N.J.A.C. 5:23-2.31.

Name: _____ / _____
Please print name of property owner or responsible person in charge of work / Company responsible for work

Address: _____

Phone: _____ Fax: _____

Signature: _____ Date: _____

If construction does not commence within one (1) year of date of issuance or if construction ceases for a period of six (6) months, construction permit is void.

In accordance with New Jersey State Law 13:45A-16.2

**FINAL INSPECTIONS ARE REQUIRED
BEFORE FINAL PAYMENT
IS MADE TO CONTRACTOR**