

Inspections Scheduled

Tuesday's Only

Fire Prevention Bureau

Monroe Township Fire District Two

10 Halsey Reed Road • Monroe Twp., NJ 08831

(609) 395-6830 • FAX (609) 395-0483

Scheduled For

Date:

___/___/___

Application For Residential Certification of Smoke Detector and Carbon Monoxide Detector Compliance

In accordance with N.J.A.C. 5:70-2.3

Dwelling location: Block No. _____ Lot No. _____

Address: _____

Owner: _____

Phone No.: _____

Circle if in (Concordia) (Clearbrook) (The Ponds) (The Encore) (Renaissance) (Stonebridge)

Authorized Agent:

Agent Name: _____

Phone: _____

Business Name: _____

Address: _____

City: _____

State: _____

Zip: _____

I hereby certify that I am the OWNER/AUTHORIZED AGENT for the above described dwelling unit and request an inspection be conducted for the issuance of a CERTIFICATION OF SMOKE DETECTOR and CARBON MONOXIDE DETECTOR COMPLIANCE. I have included payment pursuant to N.J.A.C. 5:70-2.3

Request for smoke detector certification received:

___ **more** than ten business days \$ 35.00

___ **4-10** business days \$ 70.00

___ **fewer** than 4 business days \$125.00

___ re-inspections, **for any reason** \$ 30.00

Make Check Payable to: Monroe Township Fire District No. 2

Signature _____

Date ___/___/___

BUREAU USE ONLY

___ Payment Received

___ Check

___ Cash

Date Received ___/___/___

Initial: _____

Floor: _____ Type: _____ Location: _____ Operable? _____

Floor: _____ Type: _____ Location: _____ Operable? _____

Floor: _____ Type: _____ Location: _____ Operable? _____

Floor: _____ Type: _____ Location: _____ Operable? _____

Floor: _____ Type: _____ Location: _____ Operable? _____

Inspector's Signature: _____