BOROUGH OF NEPTUNE CITY

106 W. Sylvania Avenue, Neptune City, NJ 07753, Telephone-(732) 776-7224 ext 35, Fax – (732) 776-8906

CERTIFICATE OF INSPECTION

Construction Department
Office Hours: Tuesday & Thursday 4:30 PM – 5:30 PM

Application is hereby made for inspection, approval and issuance of a Certificate of Inspection for the following dwelling/business units as provided by the Code of the Borough of Neptune City c102.15-20.

- **All properties and structures shall meet the most recent Property Maintenance Code adopted by the Borough for compliance.**

PRESENT OWNER OF THE PROPERTY _____

ADDRESS _____

ADDRESS TO BE INSPECTED _____UNIT/APT. # _____

NAME C.O. WILL BE ISSUED TO _____

DWELLING ( ) BUSINESS ( ) RENTAL ( ) SALE ( ) TRANSFER ( )

NUMBER OF BEDROOMS _____ NUMBER OF OCCUPANTS _____

*******MINIMUM 5 BUSINESS DAYS NOTICE REQUIRED FOR INSPECTIONS*******

INSPECTION DATE REQUESTED _____ TIME (after 4:30 pm) _____

- (Date and time must be approved by Code Enforcement Official as per his schedule)

PHONE NUMBER (where you can be reached for the date & time confirmation, by the Official)

_____

A $50.00 **NON-REFUNDABLE** fee must be paid at the time of application. (made out to the Borough)
A $25.00 fee will be charged for each inspection thereafter.
Failure to make application for inspection and obtain a Certificate of Inspection for each new tenant or buyer of a business/dwelling is punishable by a fine in the amount not exceeding $2000.00.

NOTICE: For dwelling units, list occupants & list ages of children only.

_____
_____
_____
_____
_____

****Children's last names not matching the parent shall attach a birth certificate or judgment.**
I hereby certify the truthfulness of the responses set forth in this application

_____
AGENT/OWNER'S SIGNATURE

INSPECTION OFFICE USE:
FEE RECEIVED BY _____ CASH _____ CHECK # _____ DATE _____
INSPECTED BY _____ ZONING APPROVAL _____ OPEN PERMITS _____
BLOCK _____ LOT _____ DATE OF ISSUE _____ C.O. # _____

CONFIDENTIAL POLICE DEPT. USE:
***Megan's Law Statement**
Has any person to commence residency after August 22, 2005 been convicted of N.J.S.A. 2C:7-1 et seq. (Registration and notification of release of certain offenders) ___yes ___no
I certify this is a true statement. _____
(new owner or tenant signature) Date