

**GLOUCESTER CITY HOUSING AND BUILDING DEPARTMENT**

**700 SOMERSET STREET, GLOUCESTER CITY, NJ 08030**

**(856) 456-7689 FAX: (856) 456-0289**

**INSPECTION APPLICATION FOR A RESIDENTIAL CERTIFICATE OF OCCUPANCY**

**NOTE: All utilities must be on for inspection.**

**(THIS SECTION IS FOR OFFICE USE ONLY)**

DATE RECEIVED \_\_\_\_\_ DATE ISSUED \_\_\_\_\_ C.O. # \_\_\_\_\_

**PLEASE COMPLETE THIS SECTION BELOW (PLEASE PRINT OR TYPE)**

Check One: House Sale \_\_\_\_\_ House Rental \_\_\_\_\_ Apartment Rental \_\_\_\_\_

Check One: Presently Vacant \_\_\_\_\_ Presently Occupied \_\_\_\_\_

PROPERTY LOCATION \_\_\_\_\_ BLOCK \_\_\_\_\_ LOT \_\_\_\_\_

APT. NO. \_\_\_\_\_ FLOOR \_\_\_\_\_ PHONE \_\_\_\_\_

OWNER/SELLER \_\_\_\_\_ PRESENT ADDRESS \_\_\_\_\_

DATE OF BIRTH \_\_\_\_\_ DRIVERS LICENSE NO. \_\_\_\_\_

PHONE No. \_\_\_\_\_ FAX NO \_\_\_\_\_

BUYER \_\_\_\_\_ PRESENT ADDRESS \_\_\_\_\_

DATE OF BIRTH \_\_\_\_\_ DRIVERS LICENSE NO. \_\_\_\_\_

PHONE No. \_\_\_\_\_ FAX NO \_\_\_\_\_

TENANT \_\_\_\_\_ PRESENT ADDRESS \_\_\_\_\_

DATE OF BIRTH \_\_\_\_\_ DRIVERS LICENSE NO. \_\_\_\_\_

PHONE No. \_\_\_\_\_ FAX NO \_\_\_\_\_

AGENT \_\_\_\_\_ ADDRESS \_\_\_\_\_

PHONE NO. \_\_\_\_\_ FAX NO \_\_\_\_\_

**DWELLING INFORMATION (PLEASE BE ACCURATE)**

SINGLE \_\_\_\_\_ ATTACHED \_\_\_\_\_ ROW \_\_\_\_\_ APTS \_\_\_\_\_ ROOMS \_\_\_\_\_

**CHECK EACH ROOM IN THE DWELLING**

1<sup>ST</sup> FLOOR LR \_\_\_\_\_ DR \_\_\_\_\_ KIT \_\_\_\_\_ BATH \_\_\_\_\_ OTHER \_\_\_\_\_  
BR \_\_\_\_\_ BR \_\_\_\_\_ BR \_\_\_\_\_ BR \_\_\_\_\_

2<sup>ND</sup> FLOOR LR \_\_\_\_\_ DR \_\_\_\_\_ KIT \_\_\_\_\_ BATH \_\_\_\_\_ OTHER \_\_\_\_\_  
BR \_\_\_\_\_ BR \_\_\_\_\_ BR \_\_\_\_\_ BR \_\_\_\_\_

3<sup>RD</sup> FLOOR LR \_\_\_\_\_ DR \_\_\_\_\_ KIT \_\_\_\_\_ BATH \_\_\_\_\_ OTHER \_\_\_\_\_  
BR \_\_\_\_\_ BR \_\_\_\_\_ BR \_\_\_\_\_ BR \_\_\_\_\_

**FORMER/PRESENT OCCUPANTS:**

**ALL PROPOSED OCCUPANTS FOR CERTIFICATE OF OCCUPANCY AND THEIR DATES OF BIRTH:**

PLEASE SIGN \_\_\_\_\_ APPLICATION & INSPECTION FEE **\$100.00**  
CHECK NO. \_\_\_\_\_ CASH \_\_\_\_\_

GAIN ACCESS TO PROPERTY CONTACT \_\_\_\_\_ PHONE \_\_\_\_\_  
EMERGENCY CONTACT PERSON \_\_\_\_\_ PHONE \_\_\_\_\_

Please be advised all exterior violations cited shall be considered a violation of Chapter 55 and/or 66 of the Housing Ordinance of Gloucester City and must be corrected within thirty (30) days or a summons shall be issued.

**\*\*\*NOTE: FIRE EXTINGUISHERS ARE NOW REQUIRED\*\*\***