

TOWNSHIP OF LONG HILL
Application for Smoke Detector/Carbon Monoxide Detector & Fire Extinguisher
Certificate

ADDRESS _____ BLOCK _____ LOT _____

NAME OF OWNER _____ PHONE _____

NAME OF AGENT _____ PHONE _____

CLOSING DATE _____

NAME OF NEW OWNER, IF KNOWN _____

ADDRESS OF NEW OWNER, IF KNOWN _____

FEE PAID _____ CHECK# _____ DATE _____

Authorized Signature

*PLEASE TEST REQUIRED SMOKE DETECTORS BEFORE CALLING FOR
INSPECTION *

The purpose of this inspection is to verify locations of smoke detectors, carbon monoxide detectors and fire extinguisher placement and to make sure they are in proper working order.

Information showing the correct placement and fire extinguisher size is available at Town Hall.

SUBMIT TEN (10) DAYS PRIOR TO CLOSING DATE

FOR OFFICE USE ONLY

PERMIT NUMBER _____
INSPECTION DATE _____