



Paid: Re-Inspection fee:

Pine Beach Borough

Certificate of Occupancy Application

Application Date: _____ Inspection Date: _____

Resale [] Rental []

Projected Closing Date: _____ Projected Occupancy Date (rental only): _____

Address of Property to be inspected: _____

Block: _____ Lot: _____

Indicate use of structure: Single Family Duplex Condo Apt. Other

Number of Floors: _____ Number of Bedrooms: _____

Name of Owner: _____

Address of Owner: _____

Cell Phone #: _____

Agent (if any): _____

Agent Cell Phone #: _____

Email (for inspection setup): _____

Phone Number (for inspection setup): _____

The applicant is requesting an inspection of the property for the above designated purpose. Your signature authorizes such inspection and the owner agrees to make all the necessary repairs found in violation before a CO will be issued. Should you fail the inspection, there is a \$40 re-inspection fee that needs to be paid in advance for the re-inspection.

Please allow a minimum of two weeks processing time.

Owner or Agent Signature: _____