



# Township of Branchburg

1077 US HIGHWAY 202 NORTH, BRANCHBURG, NJ 08876-3936

TELEPHONE: (908) 526-1300 x158

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www.branchburg.nj.us

OFFICE OF THE FIRE OFFICAL

## APPLICATION FOR CERTIFICATE SMOKE DETECTOR/CARBON MONOXIDE ALARM/PORTABLE FIRE EXTINGUISHER COMPLIANCE

Date: \_\_\_\_\_ Block: \_\_\_\_\_ Lot: \_\_\_\_\_

Address to be inspected: \_\_\_\_\_

Year home built: \_\_\_\_\_

Current owner's name: \_\_\_\_\_

Current owner's address: \_\_\_\_\_

Telephone numbers: Home: \_\_\_\_\_ Please check if unlisted  Work: \_\_\_\_\_

Realtor's name: \_\_\_\_\_

Realtor's telephone number: \_\_\_\_\_

Purchaser's name: \_\_\_\_\_

This structure is used as a:  One (1) family  Two (2) family  Townhouse/Condo

This property will be (check one only):  Sold  Leased to a new tenant / Date of closing: \_\_\_\_\_

I am hereby making application for a SMOKE/CARBON MONOXIDE ALARM/PORTABLE FIRE EXTINGUISHER COMPLIANCE CERTIFICATE for the above mentioned property. I further hereby certify that the information contained herein is correct. I understand that any false statements will result in the revocation of the certificate and may result in the issuance of penalties up to \$500 per NJAC 5:70-2.12, plus \$500 per NJAC 5:70:12A.

See reverse side for Smoke/Carbon Monoxide Detector/Portable Fire Extinguisher Placement

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Type or print name: \_\_\_\_\_

The application fee for a Certificate of Smoke Detector, Carbon Monoxide Alarm, and Portable Fire Extinguisher Compliance (CSDCMAPFEC) as required by N.J.A.C. 5:70-2.3, shall be based upon the time remain ing before the change of occupant is expected, as follows:

- Fees and penalties:
1. Request for a CSCDMAC received **more than 10** business days prior to the change of occupant - **\$35.00**
  2. Request for a CSCDMAC received **four to 10** business days prior to the change of occupant - **\$70.00**
  3. Request for a CSCDMAC received **fewer than four** business days prior to the change of occupant **\$125.00**
- \* There is a reinspection fee of \$10.00 for each inspection made after two (2) initial inspections.

Make checks payable to: Branchburg Fire Safety

Mail payment & application form to: Township of Branchburg  
Office of the Fire Official  
1077 US Highway 202 North  
Branchburg, NJ 08876-3936

To schedule your inspection and/or for questions on placement please call 908-526-1300 x158 or deliver in person to the Office of the Fire Official in the Municipal Building.

### For Office Use Only

Date Paid: \_\_\_\_\_ Amount Paid/Collected: \_\_\_\_\_

Interconnected all floors:  Yes  No  Owner occupied  Owner leased

Floors interconnect:  Basement  1<sup>st</sup>  2<sup>nd</sup>  3<sup>rd</sup>  4<sup>th</sup> Qty stories: \_\_\_\_\_

Number of alarms each floor: Basement \_\_\_\_\_ 1<sup>st</sup> \_\_\_\_\_ 2<sup>nd</sup> \_\_\_\_\_ 3<sup>rd</sup> \_\_\_\_\_ 4<sup>th</sup> \_\_\_\_\_

CO Detector: \_\_\_\_\_

Portable Fire Extinguisher \_\_\_\_\_