



SOUTH RIVER BUREAU of FIRE PREVENTION

DEPARTMENT of PUBLIC SAFETY

OFFICE OF THE FIRE MARSHAL

48 WASHINGTON STREET

Tel. (732) 257-1999 ext. 136

SOUTH RIVER, NJ 08882

Fax (732) 613-4035

APPLICATION FOR ONE & TWO FAMILY DWELLINGS CERTIFICATE OF SMOKE DETECTOR AND CARBON MONOXIDE ALARM COMPLIANCE

Dwelling Location: _____ Block #: _____ Lot #: _____
(not mailing address)

Street: _____

Municipality: SOUTH RIVER County: MIDDLESEX

NOTE: ALL BOXES MUST BE CHECKED IN ORDER FOR CERTIFICATION TO BE VALID

- Smoke detector on each level of the dwelling, basements & including attics if occupied. Excluding attic storage or crawl spaces; and
- Smoke detector & carbon monoxide alarm outside each separate sleeping area; and (within 10 feet of bedrooms) Number of Units to be Inspected Single Family
- All smoke detectors are in working order. Carbon Monoxide alarm(s) are in working order. Two Family
- This is a _____ story dwelling with basement without a basement. finished basement.
- basement with kitchen. basement with bedroom(s).
- Occupied attic? yes no Portable Fire Extinguisher yes no

An inspection shall be conducted by the owner or an authorized representative of the owner. The smoke detectors required above shall be located in accordance with NFPA 74-1984, the carbon monoxide alarm(s) installed per NFPA 720. The detectors are not required to be interconnected. Battery powered detectors are acceptable. NOTE: AC powered and/or alarms interconnected smoke detectors installed in homes constructed after January, 1977 shall be maintained in working order. See diagrams on the back of this application for further information regarding installation. The Legislature amended and enacted P.L.1991, c. 92 (C.52:27D-198.1), requiring that all one- and two-family dwellings at a change of occupancy be provided with a portable fire extinguisher, in addition to the requirements for smoke and carbon monoxide detectors. This provision does not apply to seasonal rental units. This act was signed into law on April 14, 2005 with an effective date of November 1, 2005.

***** SMOKE DETECTORS CERTIFICATIONS ARE VALID FOR SIX (6) MONTHS *****

Applicants Name: _____ Date Filed: _____
(Print Name) Home Phone #: _____

Address: _____ Work Phone #: _____

City/State: _____ Zip: _____ Fax #: _____

Applicant Signature: _____ Closing Date: _____

Contact Person: _____ Phone #: _____

**As of 5/1/2015
FEE SCHEDULE**

\$ 50.00 per unit

\$ 100.00 if certificate is required within 10 days

\$ 150.00 if certificate is required within 3 days

RE-INSPECTION FEE

If needed, is an additional fee in the amount of 1/2 fee schedule.

NOTE: A check or money order in the amount specified in the Fee Schedule should be made payable to BOROUGH OF SOUTH RIVER and must accompany this application. Please allow two to three weeks for processing. Please fill in all of the above requested information so to ensure that the inspection is completed before the closing date. A CSDCMAC shall not be transferable. If the change of occupancy specified in the application for a CSDCMAC does not occur within six (6) months, a new application shall be required.

***** APPLICATION FEES ARE NON-REFUNDABLE *****

FOR OFFICIAL USE ONLY

Receipt # _____ Amount \$ _____

Received by: _____ Date Payment Rec'd _____ Cash/Check #: _____

Inspector: _____ Inspection Date: _____ Log # _____