## **BOROUGH of BLOOMINGDALE**

## APPLICATION FOR CONTINUED CERTIFICATE OF OCCUCPANY

Check One: Resale 🗌 Refinance (if bank requires) 🗌

Inspection Fee: \$ 200.00 – MUST BE CASH OR CERTIFIED CHECK

For appointment please call Robert (Bob) Westdyk at: 973 - 838 - 7995 ext. 4

OWNER's NAME: _		ADDRE	SS:		
Property Location for	or CCO:				
BLOCK:	LOT:	PHONE:	(H)	(C)	
Buyer Full Name:			Approximate Closing	Date:	
Type of Building:	Single Family:	Two Family:	Multi Family:	Mixed Use:	
WATER: Borough	n: Well:	Building Chara SEWAGE DISPOSAL:		er:	
Breakdown of Rooms					
Kitchen:	-	Living Room:			
Family Rm	Basement:	Attic:	Garage-Attach	or Detached:	Shed:
Explain if approvals	were granted:	Board of Adj	e property: No:	_ Yes:	
	Wha	at type of Fire Safety E	Equipment is prese	<u>nt</u>	
Smol	ke Alarms: (	Quantity: Batt Quantity: Batt	ery: Electric: _	Sprinklers:	
Please note: 1. All battery-op 2. UL label	perated alarms (sm or UL listed (217) a		10) year <b>SEALED</b> testing lab., such as	type no exceptions, a	nd have
Have there been any	Construction Perm	nits issued on this prope	erty in the last five (5	) years. None:	
Building: Plumbing:	Dated:	Electric: Fire:	Dated: Dated:		
Signature of Home C	Wher or Agent:		_ Phone No.:	Date:	
FOR OFFICE USE ONLY					
Application Receiv	/ed:	Inspection Date	:	Open Permits:	