



TOWNSHIP OF SOUTH BRUNSWICK

FIRE SAFETY BUREAU

540 Ridge Road • P.O. Box 190 • Monmouth Junction, NJ 08852-0190

Phone: 732-329-4000 x7214 • Fax: 732-438-0533

APPLICATION AND CERTIFICATION IN LIEU OF INSPECTION FOR ONE- & TWO- FAMILY DWELLING

Certificate of Smoke Alarm and Carbon Monoxide Alarm Compliance

Dwelling location: Block: _____ Lot: _____

Street Address: _____

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

- Smoke alarms are on each level of the dwelling, including basement, excluding attic or crawl space.
- Smoke alarms are outside each separate sleeping area, and within 10 feet of the bedrooms.
- Carbon monoxide alarm(s) are outside sleeping areas.
- All smoke alarm and carbon monoxide alarm(s) are in working order and within manufactures warranty.

This is a ___ story dwelling with without a basement.

An inspection shall be conducted by the owner or an authorized representative of the owner. The alarms required above shall be located in accordance with NFPA 74. The alarms are not required to be interconnected. Battery powered alarms are acceptable. Battery operated smoke alarms shall be **10-year sealed** battery type. **Note: AC powered and/or interconnected smoke or carbon monoxide detectors installed in homes constructed after January, 1977 shall be maintained in working order.**

Please Email certificate to: Seller or Seller's Representative

Applicant Name: _____

Phone Number: _____

E-Mail Address: _____

Closing Date: _____

I do hereby certify that the foregoing statements made by me are true. I am aware that if any of the foregoing statements made by me are willfully false, I will be subject to penalty.

Sworn and subscribed to me before this _____ day of _____, 20____

Notary Signature

Applicant Signature

Printed Name

Note: A check or money order **made payable to "South Brunswick Township"** must accompany this application. A CSACMA shall not be transferable if the change of occupancy specified in the application for a CSACMA does not occur within six months, a new application shall be required.

Fee: \$50

*** Application Fees are Non-refundable ***

For Office Use Only

Received: _____ Accepted: _____ Rejected: _____ Certificate Issued: _____

John J. Funcheon, Fire Marshal