SALE CERTIFICATE OF OCCUPANCY APPLICATION

NOTE A NEW CERTIFICTE OF OCCUPANCY AND INSPECTION IS REQUIRED PRIOR TO
ANY ADDITIONAL AND/OR NEW TENANTS

BUYERS NAME AND MAILING	ADDRESS:				
				PHONE#	
PROPERTY ADDRESS:					
AGENT NAME:					
PROPOSED SETTLEMENT DAT	E REQUIRED:			v. 11	
SMOKE DETECTORS MONITO	RED: YES:	NO:	- Al-Al-Al-Al-Al-Al-Al-Al-Al-Al-Al-Al-Al-A		
<u>IF YES, CERTII</u>	FICATE REQUI	RED FRO	M ALARM COMPA	<u>NY</u>	
	TODIZED TO C	CCIDV II	NITT TO A COLL A DILLI T	AND CUII D	
LIST INDIVIDUALS AUTI	IURIZED IU U	CCUPI U.	NII-EACH ADULI	AND CHILD	
NAME(PLEASE PRINT)	DATE OF BIRTH (IF UNDER 18)	,		DATE OF BIRTH (IF UNDER 18)	
1.		5			
2		6			
3	MARANA AND AND AND AND AND AND AND AND AND	7			
4		8			
I CERTIFY THAT THIS INFO	RMATION IS COI	RRECT TO	THE BEST OF MY KN	IOWLEDGE.	
Application is hereby made for inspection	, approval and issua	ance of a CEF	RTIFICATE OF OCCUPA	NCY as provided by	
Ventnor Ordinance 8333 - Chapter 138.	, 11			•	
OWNER/AUTHORIZED AGENT		DATE			
OWNER, NOTHORIZED NADIVI		Dill			
	FOR OFFIC	E USE ON	LY		
\$50.00 FEE PAID CAS	SHCHEC	CK	LAST 4 DIGITS	CARD	
(NON REFUNDABLE)					
DAME OF INCIDENTION.			ጥነለው.		
DATE OF INSPECTION:				PASS/FAIL	
APPROVED FOR ISSUANCE:			DAID.	FASS/FAIL	
PICK UP/MAIL			DATE	PASS/FAIL	
I TOIL OI / MARIN			± -		
OCCUPANCY LOAD			NO ENTRY		

UPDATED: 4/16/24 PL