



BOROUGH OF ANDOVER
 137 Main Street
 Andover, New Jersey 07821
 973-786-6688 – office 973-786-7231 – fax
 www.andoverboroughnj.org

**Fire Prevention Smoke and Carbon Monoxide
 Detector Inspection Application**

We the undersigned do hereby make an application in accordance with Uniform Fire Safety Act PL 1991, Chapter 92, whereby we request an inspection of the smoke detection and carbon monoxide systems in the below referenced property.

Date: _____ Block _____ Lot _____

Address of Property: _____

<p><u>FEE:</u> \$50 – 10 business or more \$75 – 10 business days or less \$50 - Reinspection Fee</p>

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Name of Present Owner/ Seller: _____

Mailing Address of Owner /Seller: _____
 Phone #: _____

Name of Buyer / Tenant: _____

Mailing Address of Buyer / Tenant: _____
 Phone #: _____

** Access Information: _____

Name of Person Meeting Inspector: _____
 Phone #: _____

Official Use ONLY

I the undersigned Fire Official do hereby certify that on _____ I inspected the above referenced property as required by Uniform Fire Safety Act PL 1991, Chapter 92, and I find the said property to be in compliance with Fire Safety Act PL 1991, Chapter 92 and Carbon Monoxide Alarm Compliance NJAC 5:70-2.3 and has at least one fire extinguisher.

Signature: _____
Thomas Pinand, Fire Inspector

Certificate #: _____ **Date Approved/ Issued:** _____

(for office use only)

Inspection Date: _____ **Received by:** _____ **Cash** _____ **Check#** _____

*Checks made payable to: Andover Borough

*We must receive payment prior to inspection.

*Inspections are scheduled Tuesdays between 3 p.m. and 4 p.m.