

BOROUGH OF SOUTH PLAINFIELD
Building Department
2480 Plainfield Avenue
South Plainfield, New Jersey 07080
Tel: 908-226-7640 Fax: 908-754-1179

CERTIFICATE OF MUNICIPAL COMPLIANCE

For Smoke and Carbon Monoxide Detectors – Certificate of Occupancy

Inspections are conducted between 9:00 am to 12:00 pm Monday through Friday.

One (1) to four (4) family dwelling including townhouse - **\$65.00** per dwelling unit.
Multi-family dwelling including condominium - **\$50.00** per dwelling unit.
One (1) to four (4) family dwelling including townhouse at a special time - **\$125.00** per dwelling unit.
Multi-family dwelling including condominium at a special time - **\$100.00** per dwelling unit.
Reprint of any issued certificate - **\$25.00**
First re-inspection for failed or missed inspection - **\$35.00** per dwelling unit.
Second re-inspection for failed or missed inspection – **cost of initial inspection.**

******Payment by check or money order only. Payable to Borough of South Plainfield.******
Applications to be submitted in-person only.

Smoke detectors shall be required on each habitable level of the home. Smoke detectors shall be located on ceilings or within six (6) inches of the ceiling but not in corner. Smoke detectors shall be located within the immediate vicinity of all bedrooms such as bedroom hallways but no more than ten feet (10') from the furthest bedroom door. Ten (10) year sealed battery powered smoke detectors shall be installed. **However, homes built after 1977 which requires a/c smoke detectors or a/c interwire smoke detectors or interwire smoke detectors with battery backup must maintain these types of detectors and cannot substitute with battery operated smoke detectors.** NOTE: Smoke detectors expire after ten (10) years.

Carbon Monoxide detectors shall be located within the immediate vicinity of all bedrooms such as bedroom hallways but no more than ten feet (10') from the furthest bedroom door. DO NOT locate Carbon Monoxide detectors within the bedroom unless you have a Carbon Monoxide detector in the hallway.

Homeowners with alarm systems must have annunciators within ten feet (10') of bedrooms and on each level. Alarm company must be notified that the system is being tested prior to inspection.

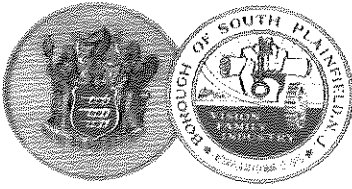
All one and two family homes must have a **2A-10B:C fire extinguisher** no more than ten (10) pounds available within ten feet (10') of the kitchen area and located in the path of egress. The extinguisher must be listed, labeled, charged and operable. The extinguisher shall be **mounted** using the manufacturer's hanging bracket so the operating instructions are clearly visible. It must be visible and cannot be more than five feet (5') above the floor.

Homeowners with sump pumps/pits shall have the area open for inspection. Sump pumps shall not discharge into sanitary sewer systems.

Homeowners who performed work on their homes **WITHOUT PERMITS, UPON DISCOVERY**, shall be subject to a minimum penalty of \$250.00. This includes but is NOT limited to swimming pools, spas/hot tubs, decks, sheds, garage conversions, basement alterations, wood stoves, furnace replacement, hot water heater replacement, central air conditioning, oil to gas conversion, tank removal/abandonment, etc.

Homeowners and/or agents: It is your responsibility to see that all open permits are closed out prior to the inspection. Please **DO NOT** schedule real estate closings until all open permits and/or violations have been corrected. **Certificates will be generated within two (2) business days.**

**IF THE PROPERTY PRESENTS HEALTH OR SAFETY ISSUES FOR THE INSPECTOR,
INSPECTION MAY BE REFUSED. CORRECTIVE ACTION FALLS ON SELLER.**



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INSPECTION REQUEST

Present Owner: _____

Property Location: _____

Block: _____ Lot: _____ Qual: _____

Buyer / Tenant: _____
(Circle One) (PLEASE PRINT CLEARLY)

Buyer / Tenant contact telephone number: _____

One Family _____ Two Family _____ Multi-Family / Other _____

Applicant Waiver: The undersigned hereby requests a Smoke Detector / Carbon Monoxide and Fire Extinguisher Certification and holds the Borough of South Plainfield and its Officials, Employees, Officers, and Inspectors harmless in the event that a detector becomes inoperable or otherwise be put out of service. **Please read requirements for Smoke Detector / Carbon Monoxide Detector and Fire Extinguisher location.** _____ (Please initial.)

Applicant Signature: _____

Applicant Name: _____

Telephone Number: _____

Will the Certificate be picked-up _____ or mailed to: _____

****PLEASE DESIGNATE ONE CONTACT TO RECEIVE INFORMATION ON THIS CERTIFICATE****

OFFICIAL USE ONLY

Inspection Date Scheduled: _____ Receipt # _____

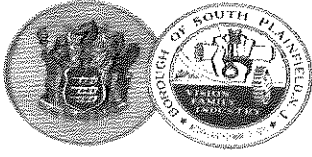
Approved as: _____ Date: _____ Inspector: _____

Smoke Detectors* _____ Carbon Monoxide Detectors* _____
*verify expiration date (see attached)

Fire Extinguisher: YES NO Sump Pump YES NO

Fire Sprinkler System: _____ Water Heater/Boiler Discharge Valve _____

Notes: _____



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HOUSE EVALUATION

Property Location: _____

Block: _____ Lot: _____ Qual: _____

Does the home have: (circle response)

1. Finished Basement: YES NO

If yes, Exterior walls of basement:		
Sheetrock	Paneling	Block
Bathroom in Basement?	YES	NO

2. Central Air Conditioning / Furnace / Boiler?
(circle all items that exist) YES NO

Original Replacement

3. Generator / Sump Pump?
(circle all items that exist) YES NO

Original Replacement

4. Water Heater Replaced? YES NO

5. Deck? YES NO

6. Shed / Gazebo / Pergola ?
(circle all items that exist) YES NO

7. Pool? YES NO

8. Installing / Existing Radon System? YES NO

Number of full bathrooms:	_____
Number of half bathrooms:	_____

UPDATE TO MAILING ADDRESSES FOR OWNERS

If you will be renting out the property/or you have a different mailing address for Tax and Sewer billing, please provide the information below.

Please note: Property owners are responsible for all charges to the property. Even if you are escrowed with a lender, we need to be able to get any notices of delinquency to you so that you are aware of any unpaid charges that could result in Tax Sale.

PLEASE PRINT CLEARLY

Name _____

Address of Property _____

Block # _____ Lot# _____ Qualifier _____

Owner Contact phone# () _____

() _____

Mailing address: Tax _____ Sewer _____ All _____

Address: _____

*Name cannot be changed for Tax mailing, however a *Bill To:* can be done for sewer billing to provide sewer utility bill to tenants. All delinquent notices will default to the owner's information on record.

Tenant Name (sewer billing only) _____

**If renting property, be sure your tenant has a CO to reside at the premises and that you have registered as an Absentee Landlord with the Municipal Clerk's Office.*

Photoelectric Smoke Alarm Model [REDACTED]

9V BATTERY POWERED

For repair or service return to Kidde, Residential and Commercial, 1016 Corporate Park Drive, Mebane, NC 27302. Constant pulsating alarm indicates that particles of combustion have been detected. Periodic flashing (45 sec.) of the red LED indicates that the alarm is operating.

The HUSH® button will decrease the sensitivity for 10 minutes. During this time, the red LED will flash every 10 seconds. An intermittent "CHIRP" accompanied by a red LED flash indicates a low battery. See the inside of the battery door for complete battery information. Not recommended for operation at temperatures below 40°F or above 100°F, or in humidity higher than 85%, as these conditions may reduce battery life. Clean your detector using a vacuum cleaner hose or compressed air and vacuuming or blowing air through the openings around the perimeter of the alarm.

MANUFACTURED UNDER ONE OR MORE OF THE FOLLOWING US PATENTS, 4,246,572 4,972,181, D346,981 OTHER PATENTS PENDING

FOR COMPLETE OPERATING INSTRUCTIONS
REFER TO THE OWNER'S MANUAL
WEEKLY TESTING IS REQUIRED

Sensitivity = 2.11 +/- 0.91 percent/ft
[REDACTED]



SINGLE STATION SMOKE ALARM
ISSUE NO. [REDACTED]

2020, NOV, 09