



# Borough of Netcong

23 MAPLE AVENUE  
NETCONG, NEW JERSEY 07857

TEL (973) 347-0252  
FAX (973) 347-3020

## CERTIFICATE OF HABITABILITY APPLICATION

Residential : \$35.00

Address of Property: \_\_\_\_\_

Block \_\_\_\_\_ Lot \_\_\_\_\_

Single Family \_\_\_\_\_ Multifamily \_\_\_\_\_

Name of Owner: \_\_\_\_\_

Address of Owner: \_\_\_\_\_

Rental \_\_\_\_\_ Resale \_\_\_\_\_

Name of New Owner/Renter: \_\_\_\_\_

Date of closing/moving: \_\_\_\_\_

### Description of Dwelling:

Number of Bedrooms: \_\_\_\_\_

Number of Bathrooms: \_\_\_\_\_

Number of Kitchens: \_\_\_\_\_

Number of Other Rooms: \_\_\_\_\_

Number of Entrances: \_\_\_\_\_

Finished or Unfinished Basement: \_\_\_\_\_

Finished or Unfinished Attic: \_\_\_\_\_

# of Smoke Detectors \_\_\_\_\_

# of CO Detectors \_\_\_\_\_

# of Fire Extinguishers \_\_\_\_\_

Person to Contact for Inspection: \_\_\_\_\_

Phone Number: \_\_\_\_\_

### -----FOR OFFICE USE ONLY-----

inspection date/time: \_\_\_\_\_

approved:    yes / no

comments: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_ date

\_\_\_\_\_ signature