



# BOROUGH OF PARK RIDGE

53 Park Avenue  
Park Ridge, NJ 07656

PHONE: (201) 573-1800  
FAX: (201) 391-7130  
Website: [www.parkridgeboro.com](http://www.parkridgeboro.com)

Dear Property Owner:

Prior to the closing on the sale of residential property, two certificates are required by the Borough:

1. **Smoke Detector, Carbon Monoxide Certification and Fire Extinguisher Compliance:**

This is a notarized affidavit by the seller that smoke detectors, carbon monoxide alarms and ABC rated fire extinguishers are installed and in operating condition. While the Borough reserves the right to inspect a premise prior to issuing the certificate, in general, the Borough relies on the seller's affidavit.

2. **Certificate of Continued Occupancy (C.C.O.):**

This application causes a review of the Borough's files to determine if the seller has any open building permits or zoning violations and that the utilities, assessors and tax files are current and up to date. Again, the Borough reserves the right to inspect any property before issuing the certificates. **The buyer must sign the C.C.O. application.**

- a. **The fee for the Certificate of Smoke Detector Compliance is as follows and will be calculated by our office:**

<b>MORE THAN 10 TEN BUSINESS DAYS</b>	<b>\$ 35.00</b>
<b>LESS THAN 10 BUT MORE THAN 4 BUSINESS DAYS</b>	<b>\$ 70.00</b>
<b>FOUR OR LESS BUSINESS DAYS</b>	<b>\$125.00</b>

- b. **The fee for the Certificate of Continued Occupancy is \$25.00**  
c. The Borough has three employees who are notaries.  
d. Both certificates are issued together.  
e. Unless there are complications, the certificates should be ready within 10 business days.

**NOTE: (a) & (b) REQUIRES TWO SEPARATE CHECKS**

The applications are also available on the Borough website.



# BOROUGH OF PARK RIDGE

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(201) 573-1500 x505  
FAX: (201) 391-7130  
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## Application for Certificate of Continued Occupancy Resale of Residential Dwelling

BLOCK: \_\_\_\_\_ LOT: \_\_\_\_\_ ZONE: \_\_\_\_\_ DATE: \_\_\_\_\_

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

Present Owner of Property: \_\_\_\_\_

Address of Owner if different from above: \_\_\_\_\_

Telephone: (Home) \_\_\_\_\_ (Work): \_\_\_\_\_

Name of Buyer: (Print) \_\_\_\_\_

Present Address of Buyer: \_\_\_\_\_

Telephone: (Home): \_\_\_\_\_ (Work): \_\_\_\_\_

Number of persons to occupy premise: Adults: \_\_\_\_\_ Children: \_\_\_\_\_

Closing Date: \_\_\_\_\_ Date of Occupancy: \_\_\_\_\_

Description of Dwelling: Single Family \_\_\_\_\_ Two-Family \_\_\_\_\_ Other \_\_\_\_\_

As per Chapter 81A, Sewers of the Code of the Borough of Park Ridge, I affirm that there are no illicit connections to the Borough's sewer system, i.e. sump pump.

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 subscribe before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_

\_\_\_\_\_  
Notary Signature Seal

\_\_\_\_\_  
Applicant Signature

\_\_\_\_\_  
Printed Name

Application is hereby made for a Certificate of Continued Occupancy for the subject property indicated above.

.....  
**OFFICE USE ONLY**

\$ 25.00 Fee: \_\_\_\_\_ Received by: \_\_\_\_\_ Date: \_\_\_\_\_

Date CCO Issued: \_\_\_\_\_ Signed: \_\_\_\_\_

Smoke Certification: \_\_\_\_\_ CCO Number: \_\_\_\_\_



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## APPLICATION FOR ONE & TWO FAMILY DWELLING CERTIFICATION OF SMOKE DETECTOR, CARBON MONOXIDE ALARM & FIRE EXTINGUISHER COMPLIANCE

Dwelling Location    Block: \_\_\_\_\_    Lot: \_\_\_\_\_  
Street: \_\_\_\_\_  
Municipality: PARK RIDGE    County: BERGEN

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

- Smoke detector on each level of the dwelling, including the basement – excludes attic or crawl space
- Outside each sleeping area; and within ten feet of bedrooms
- All smoke detectors are in working order
- All carbon monoxide alarms are in working order
- 1 ABC rated dry chemical extinguisher, no larger than 10 lbs. within 10 feet of the kitchen and inspected

A new law in New Jersey requires that all new or replacement smoke detectors must be powered by a sealed, non-removable battery with a minimum battery life of 10 years or hard-wired into the building.

An inspection shall be conducted by the owner or an authorized representative of the owner. The smoke detectors required above shall be located in accordance with NFPA 74; the carbon monoxide alarm(s) installed per NFPA-723. The detectors are not required to be interconnected. Battery powered detectors and alarms are acceptable. Note: AC powered and/or interconnected alarms and smoke detectors installed in home constructed after January 1977 shall be maintained in working order. See diagrams attached for further information regarding installation.

\*\*\*\*\*

Address Certificate to be mailed \_\_\_\_\_ Phone #: \_\_\_\_\_  
\_\_\_\_\_ Work #: \_\_\_\_\_  
\_\_\_\_\_

Contact Person: \_\_\_\_\_ Phone #: \_\_\_\_\_ 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 before me this \_\_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_\_

\_\_\_\_\_  
Notary Signature  
Seal

\_\_\_\_\_  
Applicant Signature

\_\_\_\_\_  
Printed Name

**Note:** A check or money order made payable to "Borough of Park Ridge" must accompany this form. Fees are based on the time between the date this form is submitted and the closing date.

- More than 10 business days                      \$ 35.00
- Less than 10 but more than 4 business days                      \$ 70.00
- Four or less business days                      \$125.00

Once issued, a Certificate is not transferable, nor is a fee refundable. If the change of occupant does not occur within 6 months, a new application shall be required.

**FOR OFFICE USE**

Date Received: \_\_\_\_\_ Check #: \_\_\_\_\_ Certification:    Accepted    Denied

Inspection Date: \_\_\_\_\_ Certificate #: \_\_\_\_\_ Inspected/Approved by: \_\_\_\_\_

John Hansen- Fire Official

**WHERE TO LOCATE DETECTORS:**

Detectors are to be located on every level of a residence (basement, first floor, second floor) excluding crawl spaces and unfinished attics and in every separate sleeping area, between sleeping areas and living areas such as the kitchen, garage, basement or utility room. In homes with only one sleeping area on one floor, a detector is to be placed in the hallway outside the bedrooms as shown in Figure 1. In single floor homes with two separate sleeping areas, two detectors are required, outside each sleeping area as shown in Figure 2. In multi-level homes, detectors are to be located outside sleeping areas and at every finished level of the house as shown in Figure 3. Basement level detectors are to be located in close proximity to the bottom of basement stairwells as shown in Figure 4.

**WHERE NOT TO LOCATE DETECTORS:**

To avoid false alarms and/or improper operation, avoid installation of smoke detectors in the following areas:

- Kitchens – smoke from cooking may cause a nuisance alarm.
- Bathrooms – excessive steam from a shower may cause a nuisance alarm.
- Near forced air ducts – used for heating or air conditioning – air movement may prevent smoke from reaching detector.
- Near furnaces of any type – air and dust movement and normal combustion products may cause a nuisance alarm.
- A 4 inch "Dead Air" space where the ceiling meets the wall, as shown in Figure 5.
- The peak of an "A" frame type of ceiling – "Dead Air" at the top may prevent smoke from reaching detector.

**FURTHER INFORMATION ON DETECTOR PLACEMENT:**

For further information about smoke detector placement consult the National Protection Association's Standard No. 74-1984, titled "Household Fire Warning Equipment." For Carbon Monoxide alarms, their publications recommended Practice #720. These publications may be obtained by writing to the Publication Sales Department, National Fire Protection Association, Batterymarch Park, Quincy, MA 02269.

**CARBON MONOXIDE ALARMS ARE TO BE LOCATED IN EVERY SEPARATE SLEEPING AREA PER NFPA 720 AND MANUFACTURER'S RECOMMENDATIONS.**

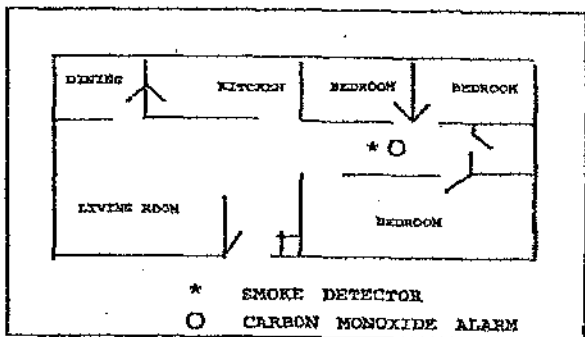


Figure 1

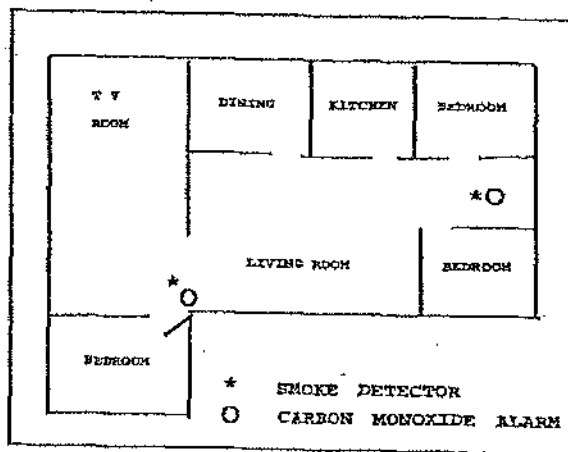


Figure 2

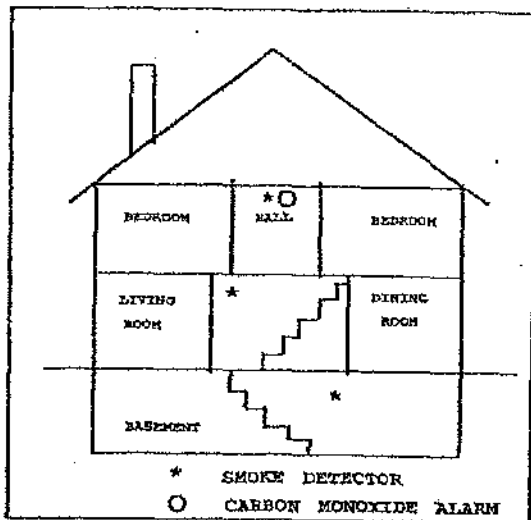


Figure 3

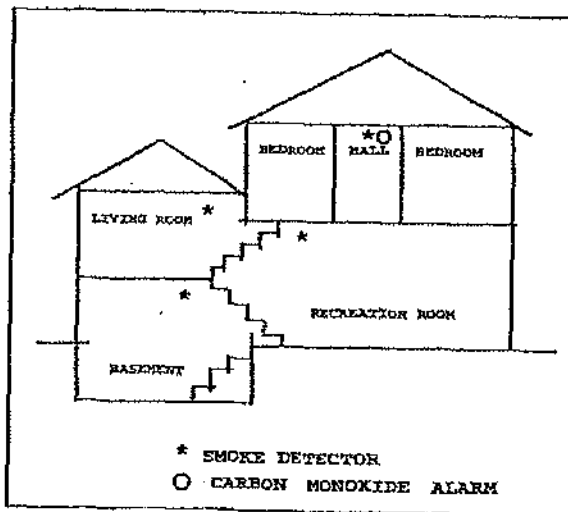


Figure 4

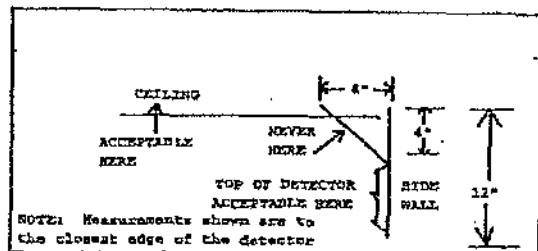


Figure 5

## SMOKE/CO DETECTOR WORKSHEET

OWNER: \_\_\_\_\_ DATE: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

BLOCK/LOT: \_\_\_\_\_

CLOSING DATE: \_\_\_\_\_

### SMOKE/CO DETECTOR:

	<u>FLOOR LEVEL:</u>	<u>DETECTOR TYPE:</u>	<u>LOCATION</u>	<u>OPERABLE?</u>
1.	_____	_____	_____	_____
2.	_____	_____	_____	_____
3.	_____	_____	_____	_____
4.	_____	_____	_____	_____

INSPECTION RESULTS:                      { } PASS                      { } FAIL

### COMMENTS:

\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
INSPECTOR