

THE FOLLOWING ITEMS MUST BE COMPLETED
PRIOR TO SUBMITTING CERTIFICATE OF
OCCUPANCY APPLICATION TO THE LONG BRANCH
FIRE MARSHAL'S OFFICE

- **PRINT OUT FROM LONG BRANCH SEWERAGE AUTHORITY OF SEWER BILL SHOWING PAID TO CURRENT QUARTER. (LOCATION OF SEWERAGE AUTHORITY IS 150 JOLINE AVENUE.)**
- **PRINT OUT FROM LONG BRANCH TAX OFFICE OF TAX BILL SHOWING PAID TO CURRENT QUARTER. (LOCATION OF TAX OFFICE IS ACROSS THE PARKING LOT IN MAIN BUILDING OF CITY HALL.)**
- **ATTACHED FORM FOR “NO OPEN BUILDING PERMITS” MUST BE SIGNED OFF FROM LONG BRANCH BUILDING DEPT. (LOCATED IN SAME BUILDING AS FIRE MARSHAL'S OFFICE.)**
- **ALL FORMS MUST BE DELIVERED IN PERSON. NO FORMS MAY BE FAXED OR MAILED. ONLY ORIGINAL APPLICATIONS CAN BE ACCEPTED.**
- **ALL PAGES MUST BE COMPLETED BEFORE SUBMITTING. PLEASE PRINT LEGIBLY.**
- **NAMES OF OCCUPANTS MAY ONLY BE CHANGED WITHIN TWO WEEKS FROM DATE OF INSPECTION AFTER TWO WEEKS NEW APPLICATION MUST BE RE-FILED.**



**City of Long Branch
Office of the Fire Marshal**

344 Broadway
Long Branch, New Jersey 07740

Phone: (732) 571-5651

Fax: (732) 222-4493

New Smoke Alarm/Fire Extinguisher Regulations

When Applying for Certificate of Smoke Alarm, Carbon Monoxide Alarm and Portable Fire Extinguisher Compliance (CSACMAPFEC)

This is required for all residential CO applications.

Effective 1/1/2019, all one and two family dwellings must have Fire Extinguishers with a rating of 2A-10B:C, no more than 10 lbs. and mounted within 10' of the kitchen and located in the path of egress. Extinguishers must be tagged or newly purchased (receipt required and must be less than one year old if newly purchased).

Effective 1/1/2019, all one and two family dwellings must have 10 year sealed battery smoke alarms. Smoke alarms are required on each level of the home and within 10' of each bedroom AND inside each bedroom. This does not apply to homes equipped with 110 volt smoke alarms or homes equipped with a low voltage fire alarm system. Low voltage alarm systems require annual certification from a licensed electrician or certified fire alarm contractor.



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Regulations for applying for a Residential Certificate of Occupancy for one and two family homes and multiple dwellings:

Certificate of Smoke Alarm, Carbon Monoxide, and Portable Fire Extinguisher Alarm Compliance is required on change of occupancy and/or transfer of title of one and two family dwellings (fee is \$35.00). Residential Certificate of Occupancy is required prior to change of occupancy on all dwellings (fee is \$60.00). When applying for a Residential Certificate of Occupancy in a one or two family dwelling, both forms are required (total fee \$95.00). When applying for a residential Certificate of Occupancy in a multiple dwelling, the Smoke Detector and Carbon Monoxide Alarm Compliance form is not required.

Regulations for applying for a Commercial Certificate of Occupancy:

New businesses or transfer of ownership of existing Commercial uses requires a Certificate of Occupancy (fee is \$60.00).

City of Long Branch

Office of the Fire Marshal

The following will be some of the things addressed during a residential C. O. Inspection

1. All areas must be accessible for inspection. The unit must be clean, sanitary and free of infestation.
2. A trash storage area must be provided with trash/recycling containers with lids.
3. Mail boxes and street numbers must be provided. Numbers must be at least 3 inches in height and visible from the street. Only Arabic numerals.
4. Doors and windows must open, close and lock properly.
5. Carbon Monoxide Alarms of battery power, hardwire, or plug-in type are required in the area of the sleeping rooms.
6. All exterior and interior flights of stairs having four or more risers must have handrails.
7. Entry & Exit doors must be equipped with safety lock (s), & no key operation from inside locks.
8. The property must be free of debris. There must be no evidence of vermin.
9. Grass must be cut, bushes trimmed and not causing a traffic hazard.
10. Poison ivy and ragweed must be removed from property.
11. Effective 1/1/2019, Fire Extinguishers must have a rating of 2A-10B:C, no more than 10 lbs. and mounted within 10' of the kitchen and located in the path of egress. Extinguishers must be tagged or newly purchased (receipt required).
12. Effective 1/1/2019. All one and two family dwellings must have 10 year sealed battery smoke alarms. Smoke alarms are required on each level of the home and in each bedroom and within 10' of each bedroom. This does not apply to homes equipped with 110 volt smoke alarms or homes equipped with low voltage fire alarm system. Low voltage alarm systems require annual certification from a licensed electrician or certified fire alarm contractor.
13. Paint must be in good repair inside and outside the unit or building.
14. Floors, walls and ceilings must be in good condition, no holes or signs of disrepair – molding intact.
15. No plumbing leaks, tile grout must be in place and in good order.
16. Hot water boiler and/or heater relief valve must have an unreduced pipe on it going to within 6" of the floor.
17. Heat must be provided for October 1st. to May 1st. of each year.
18. Every openable window and/or door must be equipped with screens May 1st – Oct. 1st. of each year.
19. Hot water temp. must be sufficient. 120-160-F

Inspections are conducted along regulatory guidelines and the above list is not meant to be all-inclusive. Please contact the Fire Prevention Bureau with your concerns for more information. You can also review the 2015 International Property Maintenance Code (available in the office of the City Clerk.)



RESIDENTIAL CERTIFICATE OF OCCUPANCY APPLICATION

RCO# _____

APPLICATION IS HEREIN MADE FOR INSPECTION OF THE FOLLOWING PREMISES AND
ISSUANCE OF A RESIDENTIAL CERTIFICATE OF OCCUPANCY (C of O) AS REQUIRED BY CITY

DATE _____ BLOCK: _____ LOT _____ ZONE _____

1. Owner of Property: _____

(if corporation, list both corporation name and owner's name)

2. Address of Owner: _____

(corporation address and owners home address required. NO P.O. BOX NUMBERS ACCEPTED)

3. Telephone # of Owner: Work _____ Home _____

Emergency 24 Hours _____

. Manager's Name and Phone #: _____

4. Property Address: _____ Apt. / Unit _____

Nearest Cross Street: _____

5. Total Number of Dwelling units at this location: _____

6. Type Of Occupancy: Rental: _____ Sale _____ Owner re-occupy: _____ Transfer of Title: _____

*If rental, please indicate if seasonal: Yes _____ No: _____ Lease Term: Begin _____ End _____

7. Type of Dwelling: House: _____ Apt _____ Condo _____

8. Number of Bedrooms: _____ 9. Number of Occupants: _____

As per the City of Long Branch Ordinance Section #262-25(I), I understand that a Code Official **WILL NOT**
inspect any dwelling unit for the purpose of issuing a Certificate of Occupancy during the period that it is occupied.

11. Type of Payment: Check#: _____ Money Order # _____

12. Name of Prospective Occupant(s): one per line

- | | |
|---------|----------|
| 1 _____ | 2 _____ |
| 3 _____ | 4 _____ |
| 5 _____ | 6 _____ |
| 7 _____ | 8 _____ |
| 9 _____ | 10 _____ |

13. _____

Official Use Only:

(Signature of Applicant)

Date of Inspection: _____ Time: _____

RESIDENTIAL CERTIFICATE OF OCCUPANCY FEE IS \$60.00 (payable to City of Long Branch)

FAILURE TO MAKE APPLICATION FOR INSPECTION AND OBTAIN A CO FOR EACH DWELLING UNIT
(PRIOR TO OCCUPANCY) MAY BE PUNISHABLE BY FINE IN MUNICIPAL COURT. APPLICATION IS
GOOD FOR 30 DAYS, INCLUDING RE-INSPECTION. NAME OF OCCUPANTS MAY ONLY BE CHANGED
WITHIN TWO WEEKS OR NEW APPLICATION MUST BE FILED.



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**SMOKE ALARM, CARBON MONOXIDE ALARM, AND
PORTABLE FIRE EXTINGUISHER COMPLIANCE
INSPECTION APPLICATION**

Date: _____ Block: _____ Lot: _____

Owner of Property: _____

Address of Owner:

Telephone: _____

Location of Property: _____

Tenant: _____

Buyer: _____

Address: _____

Telephone: _____

(Office Use Only): Inspection Date / Time: _____

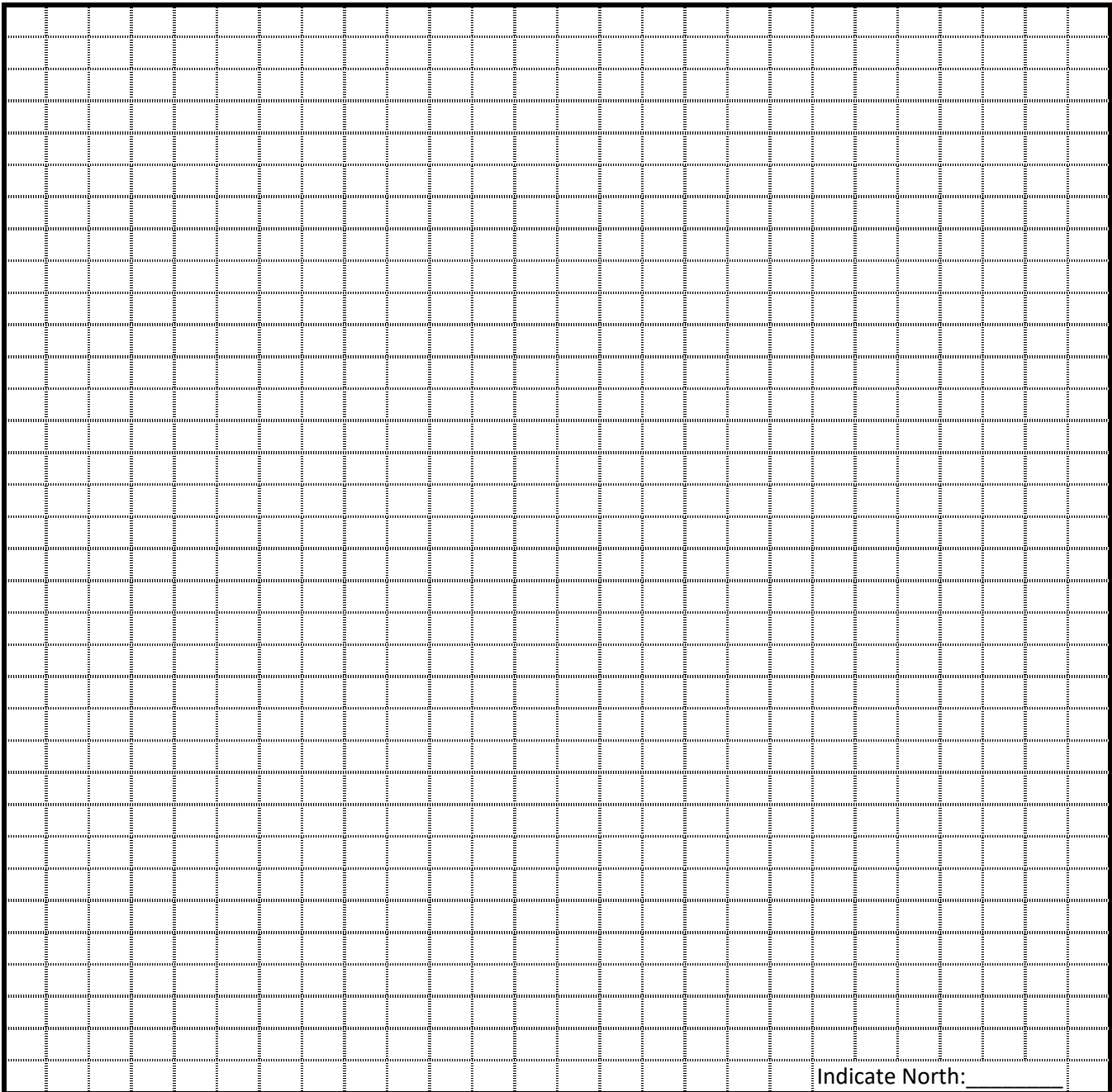
Fee **\$35.00**. As required by N.J.A.C. 5:70-2.3

Residential Certificate of Occupancy

Date: _____ **Floor Plan** Block: _____ Lot: _____

Property Address: _____ Unit #: _____

Floor#: _____ (If not a first floor residence indicate door(s) used to access)



Indicate North: _____

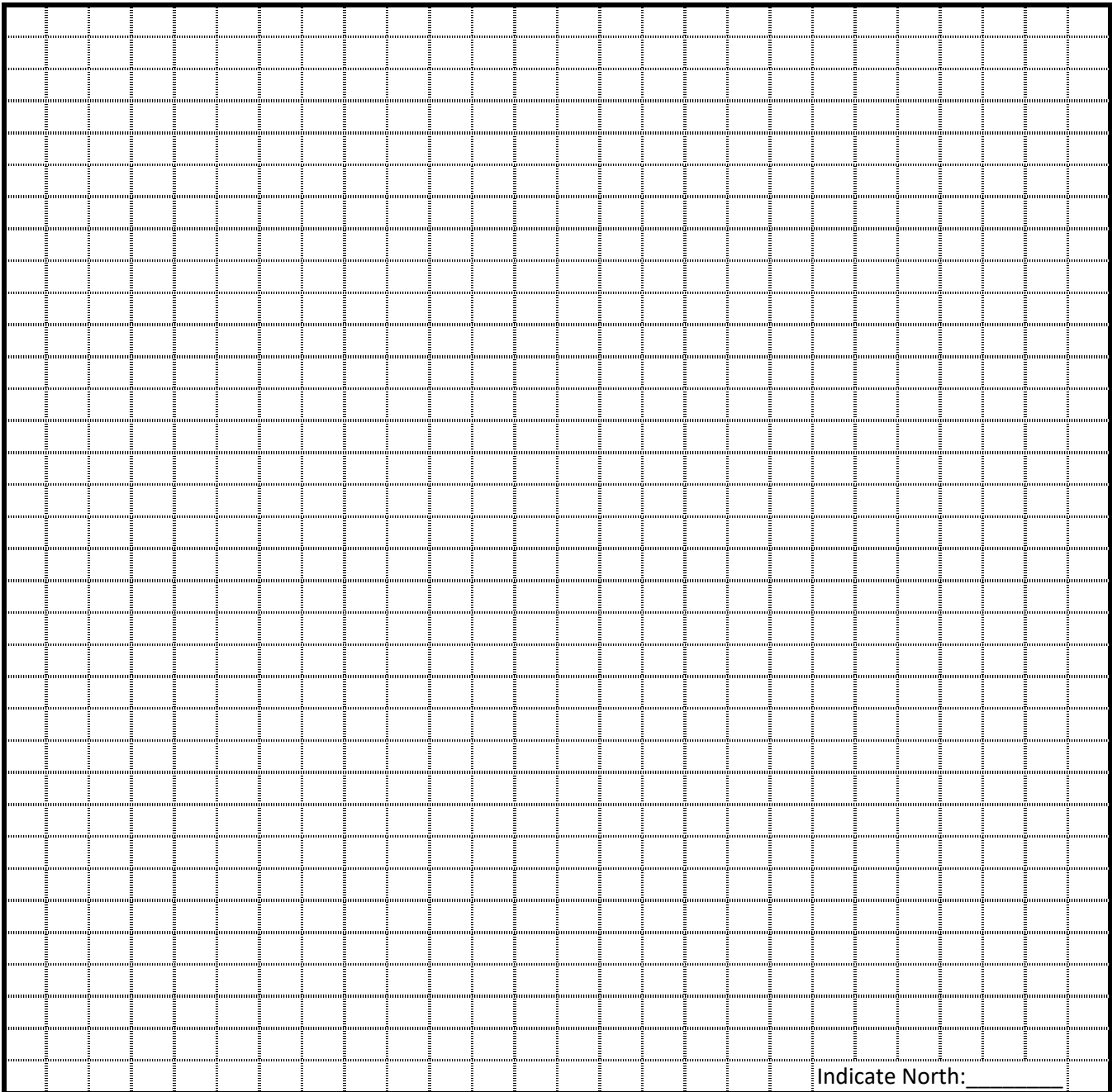
Name: _____ Signature: _____

Residential Certificate of Occupancy

Date: _____ **Floor Plan** Block: _____ Lot: _____

Property Address: _____ Unit #: _____

Floor#: _____ (If not a first floor residence indicate door(s) used to access)



Indicate North: _____

Name: _____ Signature: _____



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SALE OF PROPERTY

Name of Buyer _____

Address _____

Phone # _____

Usage: Owner Occupied _____ **Rental** _____



City of Long Branch Building Department
344 Broadway
Long Branch, NJ 07740



Phone 732 571-5690 Fax 732 571-2450

Address: _____

Block: _____ Lot: _____

Owner: _____

The building department has no open construction permits for the property listed above.

For Office Use Only

Bldg. Dept. Rep: _____

Signature: _____

Date: _____