



MUNICIPAL COMPLEX • PISCATAWAY, N.J. 08854
TOWNSHIP OF PISCATAWAY

Landlords are required to:

- Submit the Landlord Identity Registration Statement (Pages 2,3&4 of this pdf) with the accompanying fee to Piscataway Township's Housing Certificate of Occupancy Office located in the Piscataway Public Works Building at 505 Sidney Road.

The fee for just the landlord identity registration is \$100. This fee may be paid in cash only for the exact amount, certified bank check, money order or a personal check.

This form must be resubmitted every year.

For questions about this form, please contact the Housing Certificate of Occupancy Office at (732) 562-2393 or cco@piscatawaynj.org.

- Submit the Smoke Detector/Carbon Monoxide Alarm and Fire Extinguisher Compliance Application (Page 6 of this pdf) with the accompanying fee to the Piscataway Fire Prevention Bureau located in the Piscataway Public Safety Building (Police Department headquarters) at 555 Sidney Road.

Please be sure to read the instructions found on Page 5 of this pdf with the fee schedule. Fees may only be paid in cash for the exact amount, a certified bank check or a money order. For this fee, personal checks are not allowed.

This form must be submitted with every change in occupancy.

For questions about this form, please contact the Fire Prevention Bureau at (732) 562-2315 or FirePrevention@piscatawaynj.org.



MUNICIPAL COMPLEX • PISCATAWAY, N.J. 08854
TOWNSHIP OF PISCATAWAY

LANDLORD IDENTITY REGISTRATION STATEMENT
ONE AND TWO-UNIT DWELLING REGISTRATION FORM

Fee: \$100.00

The form of the certificate of Registration to be filed and distributed to the tenants by owners or non-owner occupied one and two unit dwellings shall be substantially as follows:

1) Property Address:

2) The names, addresses and phone numbers of all record owners of the building or the rental business (including all general partners in the case of a partnership) are as follows:

3) If the record owner is a corporation, the names and address of the registered agent and of the corporate officers are as follows:

Record owner is not a corporation.

4) If the address of any record owner is not located in the county in which the dwelling is located, the name and address of a person who resides in the county and is authorized to accept notices from a tenant, to issue receipts for those notices and the accept service of process on behalf of the out-of-county record owner (s) is as follows:

The address of all record owners resides in the county in which the dwelling is located.

5) The name and address of the managing agent is as follows:

There is no managing agent.

6) The name and address (including dwelling unit, apartment or room number) of the superintendent, janitor, custodian or other person employed to provide regular maintenance service as follows:

There is no superintendent, janitor, custodian or other person employed to provide regular maintenance service.

7) The name, address and telephone number of an individual representative of the record owner or managing agent who may be reached or contacted at any time in the event of an emergency affecting the dwelling or any dwelling unit, including such emergencies as the failure of any essential service or system, and who has authority to make emergency decisions concerning the building, including the making of repairs and expenditures, is as follows:

8) The name and addresses of all holders of recorded mortgages on the property is as follows:

There is no mortgage on the property.

9) If fuel oil is used to heat the building and the landlord furnishes the heat, the name and address of the fuel oil dealer servicing the building and the grade of fuel oil used are as follows:

The building is not heated by fuel oil.
 The building is heated by fuel oil, but the landlord does not furnish heat.

10) Attach a complete copy of each lease for the property.

11) Location of every Fire Alarm Panel, Fire Extinguisher or other Fire Protection Device on premises.

12) Name all tenants, including minors, who are to reside in the dwelling:

I am the landlord for the property located at: _____

The dwelling complies with the Township of Piscataway Housing and Rent Control Ordinance.

The total number of occupants living in the dwelling unit is _____

I will not authorize more than the maximum permitted tenants, which is _____ to occupy the premises. See Section 11.7 or Ordinance.

An inspection of the property will be performed by a Piscataway Township Code Enforcement Official. Please list the contact information of person (s) that will have access to property so that an inspection can be completed.

Name	Phone #

I certify that the above information is true and that I am the owner/landlord or I am a corporate officer, partner/manager authorized to sign the registration. I further certify that I understand pursuant to Ordinance 08-18, an application to renew the Landlord Registration Statement shall be filed annually by March 1.

Date

Landlord or Authorized Representative



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TOWNSHIP OF PISCATAWAY

PISCATAWAY FIRE PREVENTION BUREAU
555 SIDNEY ROAD
PISCATAWAY, NEW JERSEY 08854
(732) 562-2315

INSTRUCTIONS FOR SMOKE DETECTOR/CARBON MONOXIDE ALARM AND FIRE EXTINGUISHER COMPLIANCE APPLICATION

1. FORM MUST BE FILLED OUT COMPLETELY OR THE FORM CANNOT BE PROCESSED OR RECEIVED BY THE FIRE PREVENTION OFFICE.
2. YOU MUST CHECK ALL FIVE (5) BOXES ON TOP OF THE FORM STATING YOU HAVE WORKING SMOKE DETECTORS, CARBON MONOXIDE DETECTORS AND A FIRE EXTINGUISHER. PLEASE PROVIDE A RECEIPT FOR A NEW FIRE EXTINGUISHER.
3. YOU MUST HAVE AT LEAST ONE WORKING CARBON MONOXIDE DETECTOR IN YOUR HOUSE OUTSIDE ALL SLEEPING AREAS AND ON ALL LEVELS AND IF YOU HAVE A BASEMENT YOU MUST INSTALL ONE IN THE BASEMENT ALSO.
4. FORM MUST BE FILLED OUT LEGIBLE, SIGNED AND NOTORIZED.
5. BATTERY –POWERED SMOKE DETECTOR(S) MUST HAVE A INSTALLED (10) YEAR SEALED BATTERY.
6. FORM MUST HAVE YOUR BLOCK AND LOT NUMBERS.
7. THE OWNER MUST LEAVE A DAYTIME PHONE NUMBER WHERE THEY CAN BE REACHED.
8. THE CLOSING DATE WILL DETERMINE THE COST OF THE CERTIFICATION.
9. THE FEE SHOULD BE MADE OUT TO PISCATAWAY FIRE PREVENTION BUREAU.
10. THE OWNER CAN BE AN AUTHORIZED REPRESENTATIVE, A LETTER DATED AND SIGNED BY THE OWNER STATING THEY GIVE PERMISSION TO THE REPRESENTATIVE (NAME OF PERSON) TO BE FILLED OUT THE APPLICATION FORM. RECEIPT FOR THE FIRE EXTINGUISHER MUST BE ATTACHED THE LETTER MUST BE ATTACHED WITH THE APPLICATION.
11. FEE SCHEDULE IS ALL FOLLOWS:
 - a. \$45.00 if needed after ten (10) business days.
 - b. \$90.00 if needed four (4) to ten (10) business days.
 - c. \$161.00 If needed before four (4) business days.
 - d. \$25.00 is required if more than two (2) inspections are needed. \$25.00 per each inspection.

AS PER PISCATAWAY TOWNSHIP FIRE PREVENTION CODE, CHAPTER 19.

APPLICATION PROCESSING FEE:

YOU MUST HAVE EXACT CASH, A CERTIFIED BANK CHECK OR A MONEY ORDER
WILL BE ACCEPTED. NO PERSONAL CHECKS.

PISCATAWAY TOWNSHIP

Fire Prevention Bureau

555 Sidney Road

Piscataway, NJ 08854

Phone: (732) 562-2315

**APPLICATION FOR ONE and TWO FAMILY
CERTIFICATION OF SMOKE DETECTOR COMPLIANCE/CARBON MONOXIDE
ALARM AND FIRE EXTINGUISHER COMPLIANCE**

Dwelling Location: Block: _____ Lot: _____
Street: _____
Municipality: _____, New Jersey Zip: _____

I, _____ certify that the dwelling at the above referenced location has smoke detectors, carbon monoxide detector (s) and fire extinguisher (s) installed and are in working order as listed below:

- On each level of the dwelling, including basements; excluding attic or crawl space; and
- Outside each separate sleeping area; and all smoke detectors are in working order.
- All battery -powered smoke detector(s) must have a installed (10) sealed year battery.
- Carbon monoxide alarm(s) are in working order and outside each sleeping area.
- Fire extinguisher installed within (10) feet of the kitchen and not more than (5) feet above floor level. The size must be no smaller than 2:A 10BC and weigh no more than (10) pounds.

**** PLEASE PROVIDE A RECEIPT FOR A NEW FIRE EXTINGUISHER ****

This inspection shall be conducted by the owner or an authorized representative of the owner. The detectors required above shall be located in accordance with NFPA 74. The detectors are not required to be interconnected. Battery powered detectors are acceptable. Note: Homes constructed after January, 1977 provided with AC powered and/or interconnected detectors shall be maintained in working order. See diagram for further information regarding be listed in accordance with UL-2043 and NFPA 720.

Address Certificate to be sent: _____

Phone number: _____

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 to me this _____ day of _____, 20 _____

Notary Signature

OWNER/AUTHORIZED PARTY SIGNATURE

SEAL

Printed Name

Please provide a closing tentative closing date: _____

SALE RENTAL PROPERTY

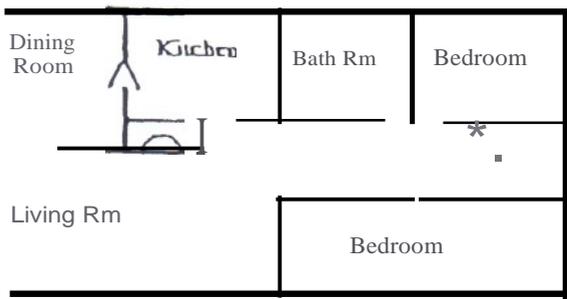
WHERE TO LOCATED:

DETECTORS ARE TO BE LOCATED ON EVERY LEVEL OF A RESIDENCE, 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. HOUSES WITH ONLY ONE SLEEPING AREA ON ONE FLOOR A DETECTOR IS TO BE PUT IN THE HALLWAY OUTSIDE THE BEDROOMS AS SHOWN IN FIGURE 1. IN SINGLE FLOOR FAMILY HOMES WITH TWO SEPARATE SLEEPING AREA TWO DETECTORS ARE REQUIRED OUTSIDE EACH SLEEPING AREA AS SHOWN IN FIGURE 2. IN MULTI-LEVEL HOMES DETECTORS SHOULD BE LOCATED OUTSIDE SLEEPING AREAS AND IN EVERY LEVEL OF THE HOME AS SHOWN IN FIGURE 3.

WHERE NOT TO LOCATE DETECTORS:

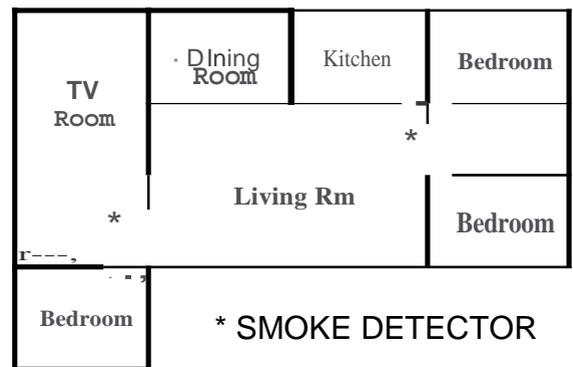
KITCHEN SMOKE FROM COOKING MAY CAUSE A NUISANCE ALARM.
 BATHROOMS EXCESSIVE STEAM FROM A SHOWER MAY CAUSE A NUISANCE ALARM.
 FORCED AIR DUCTS USED FOR HEATING OR AIR MOVEMENT MAY PREVENT SMOKE FROM REACHING DETECTOR.
 AIR FURNANCES OF ANY TYPE AND DUCT MOVEMENT AND NORMAL COMBUSTION PRODUCTS MAY CAUSE A NUISANCE ALARM.
 DEAD AIR SPACE WHERE THE CEILING MEETS THE WALLS AS SHOWN IN FIGURE 5. OR AN "A" FRAME TYPE OF CEILING, "DEAD AIR" AT THE TOP MAY PREVENT SMOKE FROM REACHING DETECTOR
 OTHER INFORMATION REGARDING PLACEMENT OF DETECTOR LOCATIONS.

*OTHER INFORMATION ABOUT DETECTOR PLACEMENT CONSULT THE NATIONAL FIRE PROTECTION ASSOCIATION PUBLICATION UNIT BATTERY PARK, QUINCY MA.



* SMOKE DETECTOR

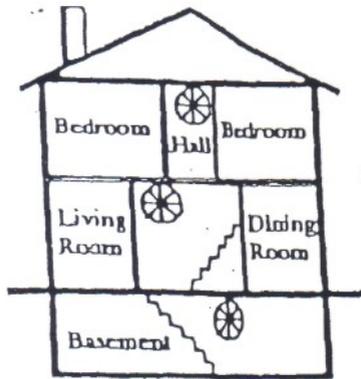
FIGURE 1.



* SMOKE DETECTOR

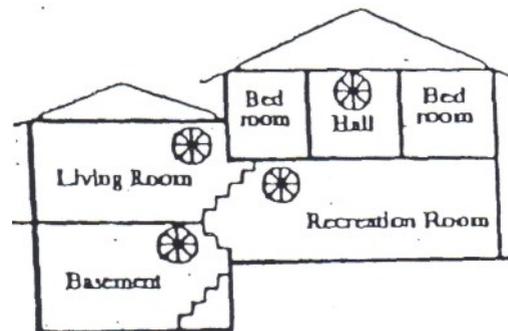
FIGURE 2.

" CARBON MONOXIDE DETECTORS ARE TO BE LOCATED OUTSIDE OF EACH SLEEPING AREA.,



* SMOKE DETECTOR

FIGURE 3.



* SMOKE DETECTOR

FIGURE 4.

Figure 5 Note: MEASUREMENT SHOWN ARE TO THE CLOSEST EDGE OF THE DETECTOR

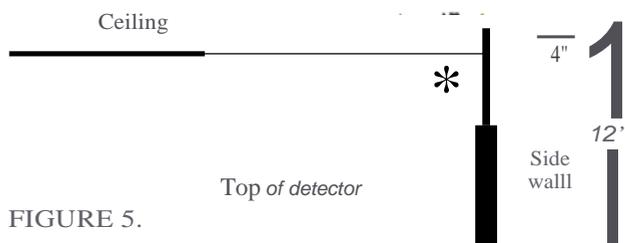


FIGURE 5.