

# BOROUGH OF HADDON HEIGHTS

Zoning and Code Enforcement

514 W. Atlantic Avenue, Haddon Heights, NJ 08035

Phone: 856-546-2580 Fax 856-546-2584

As per Ordinance 2018:1453 it is required to apply for and receive a certificate from the Code Enforcement Officer.

Please consider the following when applying for your certificate:

- No application can be filed without a settlement date
- All fees must be paid before scheduling an inspection
- Any type of lock box will **NOT** be accepted during the inspection. Someone over the age of 18 **MUST** be present for the inspection. If someone is not available during the time of inspection, this will result in an automatic failure of inspection and you will have to call to reschedule for another day.
- Cancellations will not be tolerated.

§262.2.1. Exceptions; Failed Inspections.

- Upon receipt of purchaser's agreement and acceptance by Enforcement Officer, properties may close and/or be occupied without a certificate while violations are being abated. No such agreement shall exceed 90 days.

Inspections will be as follows:

- Monday and Wednesday ONLY
- Monday available times:
  - o 9:30 AM
  - o 10:00 AM
  - o 10:30 AM
- Wednesday available times:
  - o 9:30 AM
  - o 10:00 AM
  - o 10:30 AM

Fees:

- Filing for the application: \$11.00
- First inspection: \$50.00
- Second inspection: no charge
- Third or more inspection: \$25.00

Please be aware that this inspection is **DIFFERENT** from the inspection the Fire Department conducts. You will need **BOTH** certificates in order to close. Please contact the Fire Department for more information and scheduling at 856-547-7164 ext. 80

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TODAY'S DATE: \_\_\_\_\_

SETTLEMENT DATE: \_\_\_\_\_

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

HOMEOWNERS NAME: \_\_\_\_\_

CONTACT PHONE NO. (HOME): \_\_\_\_\_

HOMEOWNERS CELL NO.: \_\_\_\_\_

REALTOR: \_\_\_\_\_

CONTACT NAME: \_\_\_\_\_

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

PHONE NUMBER: \_\_\_\_\_

CELL NUMBER: \_\_\_\_\_

I hereby certify that I have read all of the conditions on the front page of this application. I know that I am responsible for scheduling any and all inspections or re-inspections. I am authorized to make this application as either the buyer, seller, or agent of.

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

\*\*\*Do not write below this line, office use only\*\*\*

Fee Due: \$11.00 \_\_\_\_\_ \$50.00 \_\_\_\_\_ \$25.00 \_\_\_\_\_

Date Received: \_\_\_\_\_

Received by: \_\_\_\_\_

Payment Type:

Re-Inspection:

Check # \_\_\_\_\_

Check # \_\_\_\_\_

Cash \_\_\_\_\_

Cash \_\_\_\_\_

Ron Newell

Code Enforcement Officer \_\_\_\_\_ Date: \_\_\_\_\_

## CCO INSPECTION CHECKLIST

Inspection Date \_\_\_\_\_

Inspection Time \_\_\_\_\_

Address \_\_\_\_\_

Block \_\_\_\_\_

Lot \_\_\_\_\_

\*Sidewalk: vertical and horizontal deviations greater than ½ inch are a violation.

This includes walkways and driveways.\*

	In Compliance	Violation	Re- Inspection	Use Cert Date	Date CCO Issued
Use					
Sidewalk					
Walkway					
Driveway					
Work done without permits:					