

**BOROUGH OF NORTHVALE
BUILDING DEPARTMENT
116 PARIS AVENUE
NORTHVALE, NEW JERSEY 07647
201-767-3330 extension 213**

**INSTRUCTIONS FOR FILING FOR A
CERTIFICATE OF CONTINUED OCCUPANCY**

- Submit the application after answering all questions
- Contact this office to arrange for an appointment for the required inspections at least 21 days prior to your needing the certificate
- Submit telephone number and name of person(s) that we may contact to gain entry for the inspection
- Any violation of applicable codes and regulations must be abated before a CCO will be issued

**NO CCO WILL BE ISSUED UNTIL ALL ITEMS
HAVE PASSED INSPECTION**



BOROUGH OF NORTHVALE
BERGEN COUNTY, NEW JERSEY
116 Paris Avenue
Northvale, New Jersey 07647
201-767-3330 ext. 213 Fax #201-767-0372

BUILDING DEPARTMENT/FIRE PREVENTION

APPLICATION FOR CERTIFICATE OF CONTINUED OCCUPANCY

Block _____ Lot _____ Date: _____

Property Owner: _____

Property Address: _____

Unit/Apt. Number: _____ Owner Telephone Number _____

Agent or Realtor _____

Address: _____ Telephone Number _____

Attorney: (seller or tenant) _____

Contact Phone Number: _____ Alternate Number: _____

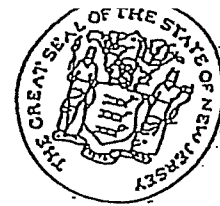
Purchaser Name: _____ Attorney Name: _____

Phone Number: _____ Phone Number: _____

Area Zoned _____ Present Use: _____ Single Family
_____ Two Family
_____ Three Family or More (legal proof required)
_____ Condo
_____ Co-Op
_____ Rental (# of existing units) _____

Date Inspected: _____ Inspected By: _____

Fee \$100.00 CCO # _____ CHECK # _____



**BOROUGH OF NORTHVALE
FIRE PREVENTION BUREAU
116 PARIS AVENUE
NORTHVALE, NEW JERSEY 07647
201-767-3330 ext. 213 Fax # 201-767-0372**

JOSEPH ZAVARDINO
Fire Marshal

**APPLICATION FOR CERTIFICATE – SMOKE DETECTOR,
CARBON MONOXIDE ALARM AND FIRE EXTINGUISHER**

DATE: _____ (FEES) ONE AND TWO FAMILY \$ 75.00
APARTMENTS - \$ 50.00 PER APARTMENT

BLOCK: _____

LOT: _____

OWNER / AUTHORIZED AGENT: _____

PROPERTY TO BE INSPECTED: _____

DATE OF CLOSING: _____

TELEPHONE #: () _____

SIGNATURE OF OWNER / AUTHORIZED AGENT: _____

***NOTE: THE CERTIFICATE OF SMOKE DETECTOR, CARBON MONOXIDE AND FIRE
EXTINGUISHER WILL BE ISSUED WITH THE CERTIFICATE OF CONTINUED OCCUPANCY***

OFFICIAL USE

FEE: _____
PAID [] CHECK # _____ CASH _____
COLLECTED BY: _____
CERTIFICATE # _____
DATE: _____



BOROUGH OF NORTHVALE
Building Department
116 Paris Avenue
Northvale, New Jersey 07647
201-767-3330 extension 213 - Fax # 201-767-0372

Joseph Zavarino
 Building / Fire

Laura Benvenuto
 Technical Assistant

APPLICATION - CERTIFICATE OF CONTINUED OCCUPANCY - RENTALS

ALL QUESTIONS MUST BE COMPLETED BY THE LANDLORD
OR LEGAL REPRESENTATIVE

Address _____ Block _____ Lot _____

Landlord Name _____

Address _____

Telephone # _____ Rental Registration Number _____

Tenants Name _____ Date of Occupancy _____

Others in Household:

Name _____ Relationship _____

Name _____ Relationship _____

Name _____ Relationship _____

Name _____ Relationship _____

Please indicate rooms available in the Rental Unit Apartment # _____

Kitchen [] Sq.Ft. _____ Living Room [] Sq.Ft. _____ Dining Room [] Sq.Ft. _____

Bathroom [] How many _____ Sq. Ft. _____ Bedroom [] How many _____ Sq. Ft. _____

Other [] Description _____ Sq. Ft. _____

I certify that the foregoing statements are true. I am aware that if any of the statements made by me are willfully false, I am subject to punishment.

 Landlord

 Date

REGISTRATION STATEMENT FOR ONE-DWELLING UNIT RENTAL OR TWO-DWELLING UNIT NON-OWNER OCCUPIED PREMISES IN ACCORDANCE WITH NEW JERSEY STATUTE 48:8-28

Address of Dwelling: _____ Block _____ Lot _____

Total Number of Dwelling Units: _____

A. Name of Owner of Record: _____

Name of Owner of Rental Business, if not Building

Owner: _____

B. If Owner is Corporation, Name and Address of agent: _____

C. If Owner does not reside or have offices in this County, give name of authorized Agent who does have residence or office in Bergen County: _____

D. Name and Address of Managing Agent, if any: _____

E. Name and Address of Superintendent, Janitor, Custodian, or Other Individual Employed by Owwner of Record or Managing Agent:

_____ Apartment #: _____

Telephone #: _____

F. Name and Address of Individual to be called in the event of an emergency: _____
_____ Apartment #: _____

G. Name and Address of any and all holders of mortgages on property:

_____ Name _____

_____ Address _____

_____ City, State, Zip _____

H. Fuel Oil/Gas

Supplier: _____

Grade of Fuel Used: _____

Statement Prepared by: _____

Date: _____

RESIDENTIAL CERTIFICATE OF CONTINUED OCCUPANCY (RCCO)
INFORMATION SHEET

This information is being provided to assist in preparing for the required RCCO inspection.

The following are the most common items the inspection will address but not all the items that could be cited:

1. The property is being used as zoned or approved (i.e. one family, two family, etc.)
2. There is no sump-pump or any unauthorized water connection into the sanitary sewer.
3. All open construction permits are inspected, approved and closed.
4. Sidewalks, if installed, are in good condition.
5. There is no interior double key lock on the primary exit/entrance door.
6. There is at least one handrail on stairs with 4 or more risers.
7. The general visual inspection reveals any item that could be considered hazardous or an imminent danger.
8. Pools are required to have approved pool barrier (fence) and gates that open out, self close and latch.

RESIDENTIAL CERTIFICATE OF CONTINUED OCCUPANCY GUIDELINES

SMOKE DETECTOR/CARBON MONOXIDE ALARMS

1. Structures with existing interconnected fire alarms

If structure has existing A/C 110 volt interconnected smoke alarms they shall be in working order.

If structure has existing low volt system an Alarm Technician from the service company shall be on site for an alarm test. A recent test certificate less than 30 days old may be acceptable.

Single station carbon monoxide alarms shall be installed in the immediate vicinity of all sleep areas.

NOTE: SMOKE ALARMS OVER TEN YEARS OLD SHALL BE REPLACED.

2. Structures with battery operated smoke/carbon monoxide alarms

On each level and outside each separate sleeping area.

Single station Carbon Monoxide alarms shall be installed in the immediate vicinity of all sleeping areas.

NOTE: SMOKE ALARMS OVER TEN YEARS OLD SHALL BE REPLACED.

January 2019 Ten-year *sealed battery-powered* single station smoke alarms shall REPLACE and be installed and listed in accordance with ANSI/UL 217.

3. Fire Extinguisher

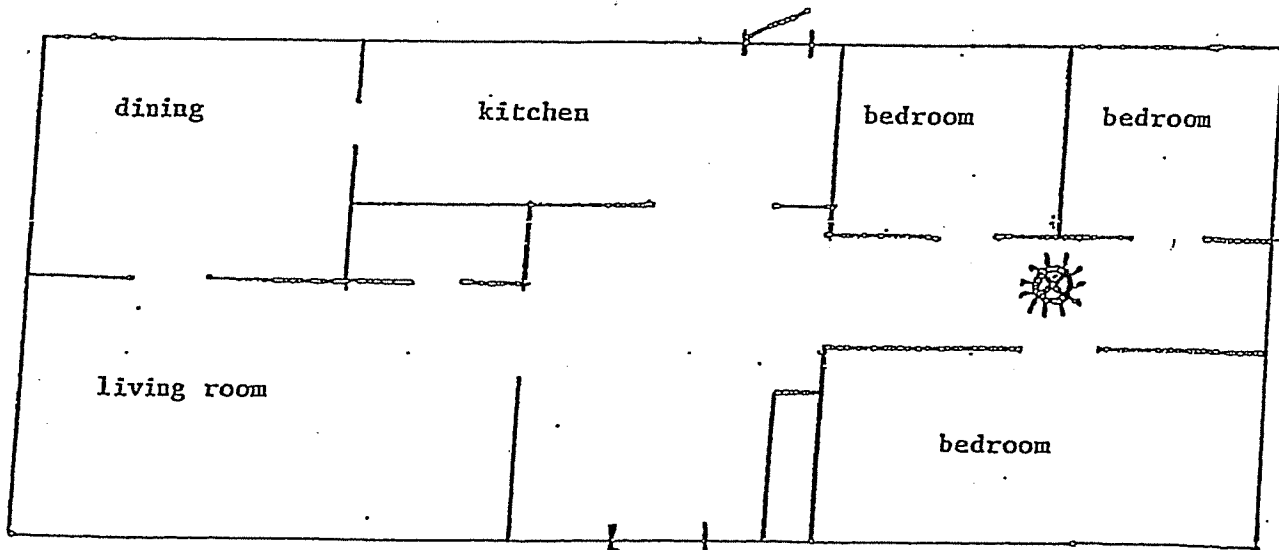
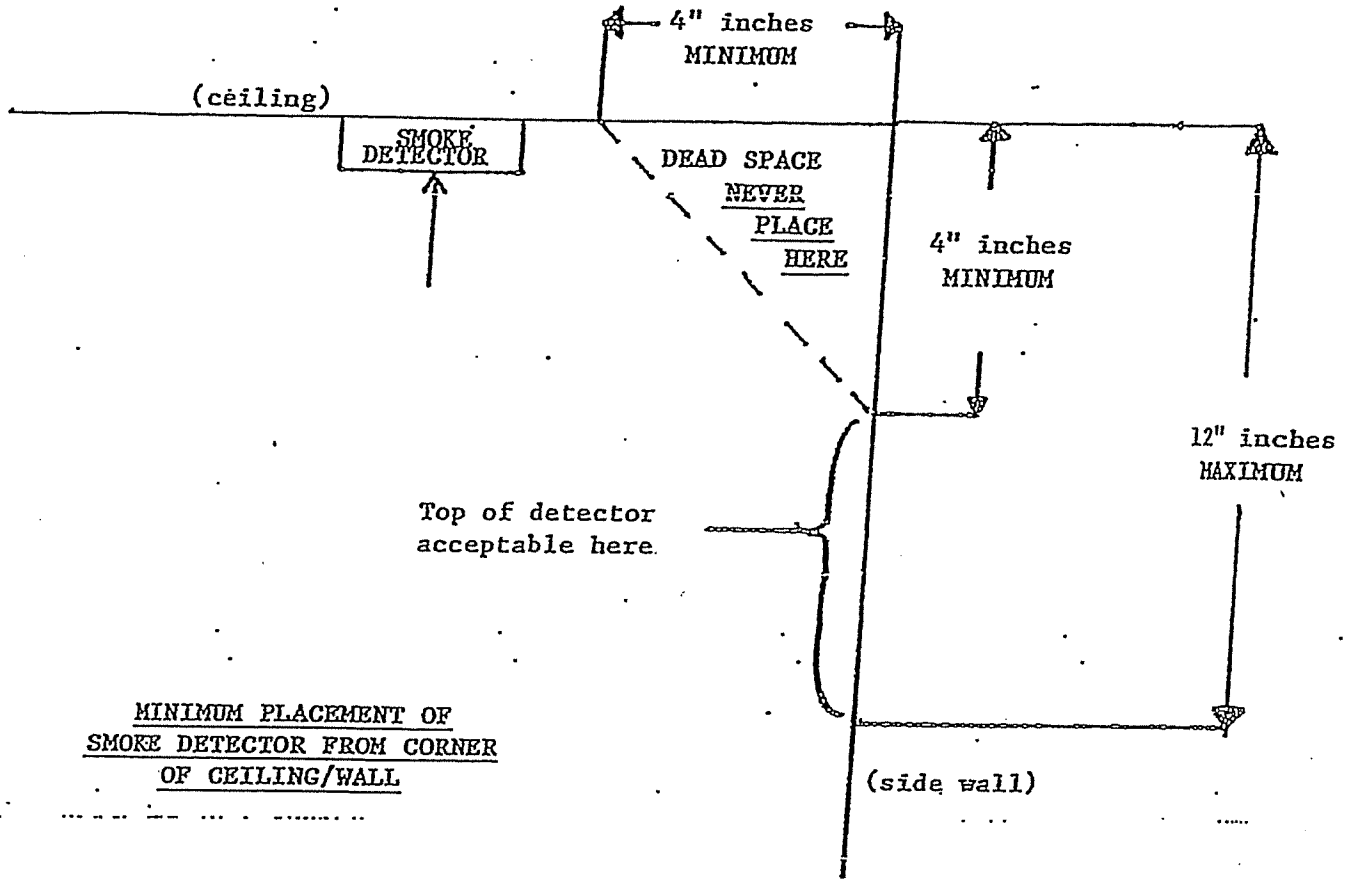
A fire extinguisher shall be an approved listed and labeled type with a minimum rating of 2A-10B: C, no more than 10 pounds, shall be hung at height no more than 5 feet, and within 10 feet of the kitchen.

STRUCTURE ITEMS

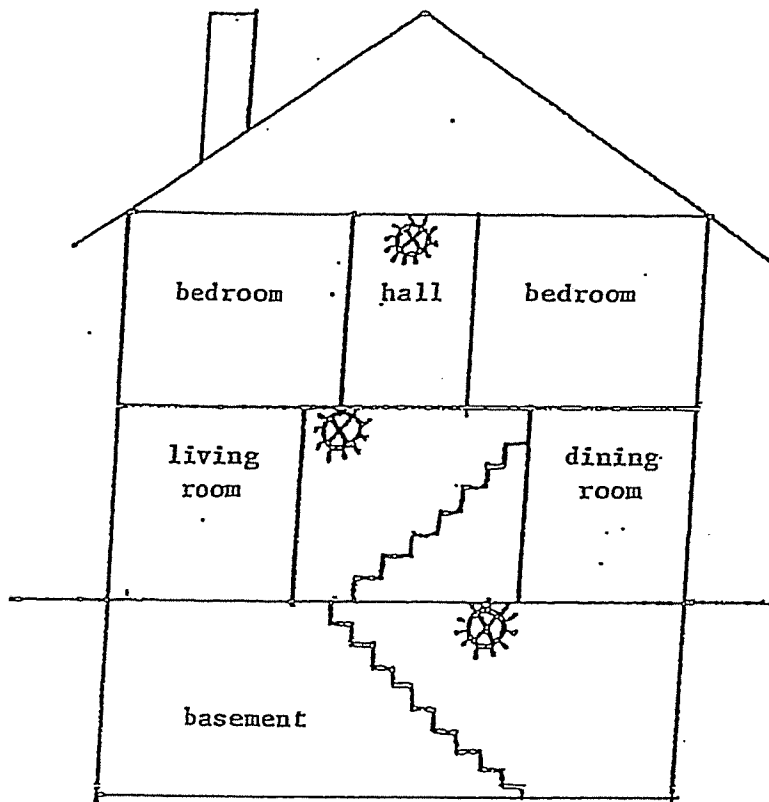
1. No sump pump shall be connected to the house sanitary sewer. Shall properly disconnect and direct outside the structure away from neighbor.
2. No front/main door shall have a lock that has a key on the interior side. Shall replace lock with a thumb twist to open on the interior door side.
3. Any open building permits shall be closed out. Check with Building Department
4. Handrail or Guards that may be required. Four risers or more for handrails / More than 30" above grade for guard.
5. Pool barriers/fence code compliant. Gate to open out, self-close and latch. Latch shall be at 54" height/on inside of gate or approved equal.
6. Confirm Residential "USE" status.
7. General condition of decks including handrails and guards.

Be advised the above are only some of the common items to be addressed other items may be cited as deemed necessary.

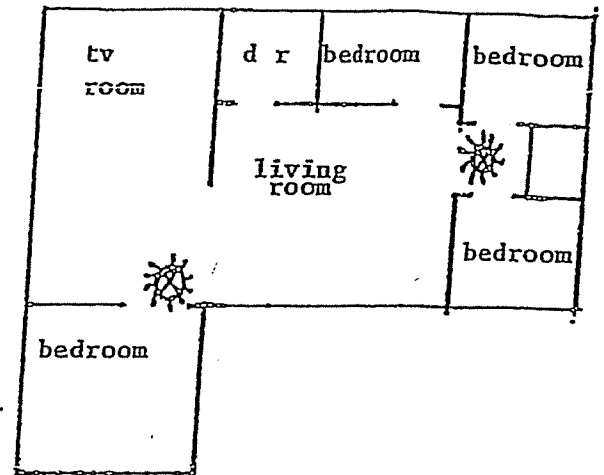
SOME EXAMPLES OF SMOKE DETECTOR PLACEMENT



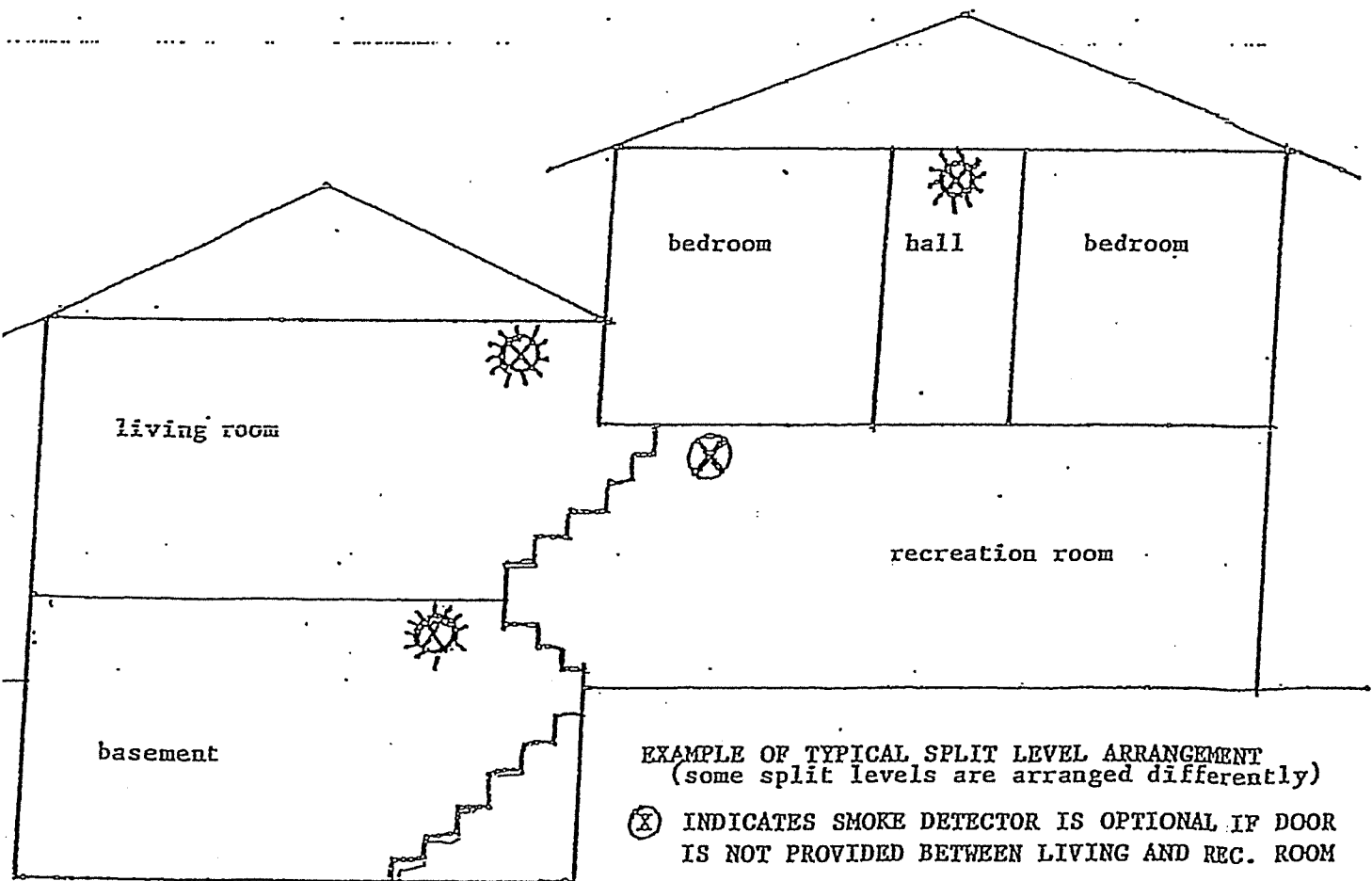
SMOKE DETECTOR SHOULD BE LOCATED BETWEEN THE SLEEPING AREA AND THE REST OF THE FAMILY UNIT.



AT LEAST ONE SMOKE DETECTOR SHALL BE LOCATED ON EACH STORY



IN FAMILY LIVING UNITS WITH MORE THAN ONE SLEEPING AREA, A SMOKE DETECTOR SHALL BE PROVIDED TO PROTECT EACH AREA



EXAMPLE OF TYPICAL SPLIT LEVEL ARRANGEMENT (some split levels are arranged differently)

⊗ INDICATES SMOKE DETECTOR IS OPTIONAL IF DOOR IS NOT PROVIDED BETWEEN LIVING AND REC. ROOM