



**THE CITY OF EAST ORANGE  
DEPARTMENT OF CODE ENFORCEMENT**

44 CITY HALL PLAZA  
EAST ORANGE, NEW JERSEY 07018

**TED R. GREEN  
MAYOR**

Eladio Negron  
Acting Director

Telephone: (973) 266-5320  
Fax: (862) 930-3580

**DIVISION OF HOUSING & INSPECTIONS**

**APPLICATION FOR CERTIFICATE OF CONFORMITY \* RESIDENTIAL/COMMERCIAL**

**BUILDING DIVISION USE**

**Building Division must verify that there are NO OPEN PERMITS and NO ELEVATOR VIOLATIONS.**

Open Permits: [ ] Yes [ ] NO Elevator Violations: [ ] Yes [ ] NO

Researched by \_\_\_\_\_ Date \_\_\_\_\_

*NO P.O. BOXES ACCEPTED. PLEASE PRINT! / APPLICATION UPDATED JANUARY 6, 2022*

**CURRENT OWNER/SELLER:** \_\_\_\_\_

*If LLC, Managing Member name required:*

ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ STATE \_\_\_\_ ZIP \_\_\_\_\_

PHONE: Day ( ) \_\_\_\_\_ EMAIL: \_\_\_\_\_

**PROPERTY ADDRESS:** \_\_\_\_\_ [ ] Residential [ ] Commercial

BLOCK: \_\_\_\_\_ LOT: \_\_\_\_\_ QUALIFIER \_\_\_\_\_ *Is the property currently vacant?* [ ] Yes [ ] NO

Number of Dwelling Units: Residential \_\_\_\_\_ Commercial \_\_\_\_\_

Square Footage of building (If commercial) \_\_\_\_\_ # of Garages: \_\_\_\_\_

*Was this property purchased at an auction?* [ ] Yes [ ] NO *Elevator at the subject property?* [ ] Yes [ ] NO

**SELLER'S ATTORNEY OR REALTOR:** \_\_\_\_\_

ADDRESS: \_\_\_\_\_ CITY \_\_\_\_\_ STATE \_\_\_\_ ZIP \_\_\_\_\_

PHONE: ( ) \_\_\_\_\_ EMAIL: \_\_\_\_\_

**PROSPECTIVE OWNER/BUYER:** \_\_\_\_\_

*If LLC, Managing Member name required:*

ADDRESS: \_\_\_\_\_ CITY \_\_\_\_\_ STATE \_\_\_\_ ZIP \_\_\_\_\_

PHONE: ( ) \_\_\_\_\_ EMAIL: \_\_\_\_\_

**BUYER'S ATTORNEY OR REALTOR:** \_\_\_\_\_

ADDRESS: \_\_\_\_\_ CITY \_\_\_\_\_ STATE \_\_\_\_ ZIP \_\_\_\_\_

PHONE: ( ) \_\_\_\_\_ EMAIL: \_\_\_\_\_



**CONTACT AND ACKNOWLEDGMENTS:**

NAME: \_\_\_\_\_ AFFILIATION: \_\_\_\_\_

PHONE #: \_\_\_\_\_ EMAIL: \_\_\_\_\_

APPLICATION PAID FOR BY: [ ] Seller [ ] Buyer

***By submitting this application, the applicant and/or contact affirms that the property's water system is connected to the public water supply system of the City of East Orange via a water meter from the East Orange Water Commission. If you cannot affirm the aforementioned, you must state the reason why via a separate written statement.***

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

**\* FEES MUST BE PAID BY CERTIFIED CHECK OR MONEY ORDER \***

This form must be completed in its entirety. At the time of inspection, all utilities must be operational. All inspections must be completed fifteen (15) working days prior to the closing date.

**IMPORTANT INFORMATION REGARDING INSPECTION FEES**

First re-inspection	No charge
Second re-inspection	\$ 75
Third and subsequent re-inspections	\$ 125

**\*\*\*\* FOR OFFICE USE ONLY \*\*\*\***

Reference No.

Date

Initials

Fee

Receipt No.

Date

PAID FOR BY: [ ] Seller [ ] Buyer

Date Assigned

Interviewer

Inspector

**INSPECTOR OR SUPERVISOR NOTES:**

**INSPECTOR'S TELEPHONE LOG:**

DATE OF CALL

PERSON CALLED & THEIR CONNECTION TO SUBJECT PROPERTY

STATUS OF CALL (e.g., Appt. made & date, left msg. etc.)

January 6, 2022