



Borough of Palisades Park

275 Broad Avenue
Bergen County, N.J. 07650

Building Department
Tel: (201) 585-4108
Fax: (201) 585-4110

RESIDENTIAL TENANT CERTIFICATE

FEE: \$75.00 PAYABLE TO BOROUGH OF PALISADES PARK

DATE: _____

BUILDING ADDRESS: _____ UNIT NO.: _____ WNY, NJ

OWNERS NAME: _____

OWNERS ADDRESS: _____

OWNERS PHONE #: _____ EMAIL ADDRESS: _____

SUPER'S NAME: _____

SUPER'S APT. # _____ SUPER'S PHONE # _____

YOU MUST SUBMIT A COPY OF THE FIRST AND LAST PAGE OF THE LEASE

FAILURE TO OBTAIN A RESIDENTIAL TENANT CERTIFICATE SHALL RESULT IN A MINIMUM FINE OF \$100.00

TENANT INFORMATION SECTION

NUMBER OF OCCUPANTS: _____ NUMBER OF BEDROOMS: _____ DATE TENANCY COMMENCED: _____

NAME OF ALL TENANTS INCLUDING MINORS: _____

TENANTS PHONE #: _____ UNIT NO. _____

INITIAL FEE - \$75.00 PER UNIT

REINSPECTION FEE - \$75.00 PER UNIT

COPY OF LEASE: () YES

CHECK #: _____

MONEY ORDER #: _____

Inspection date: _____

Inspectors: _____

It is the tenant's obligation to advise the landlord of any increase in total number of occupants.

RESIDENTIAL TENANT INSPECTION CHECKLIST

- | | | | |
|---|-----|----|-----|
| 1. Smoke and carbon monoxide detectors are required on each floors. | YES | NO | N/A |
| 2. Fire extinguishers must be accessible within 10 feet of a kitchen. | YES | NO | N/A |
| 3. No broken or cracked windows. | YES | NO | N/A |
| 4. All windows must be operable. | YES | NO | N/A |
| 5. General conditions: No peeling paint or surface deterioration. | YES | NO | N/A |
| 6. No double key lock permitted on ANY DOOR. | YES | NO | N/A |
| 7. Handrail required on all steps with 3 risers or more. | YES | NO | N/A |
| 8. GFI outlets must be within 6' of a water source. | YES | NO | N/A |
| 9. No accumulation of trash or rubbish. | YES | NO | N/A |
| 10. All permits must be closed | YES | NO | N/A |
| 11. All violations abated | YES | NO | N/A |
| 12. All fines paid. | YES | NO | N/A |

DATE: _____

INSPECTOR NAME: _____



Borough of Palisades Park

Bergen County, N.J. 07650

BUREAU OF FIRE PREVENTION
275 BROAD AVENUE
PALISADES PARK, NEW JERSEY 07650
PHONE: (201) 585-4132
FAX: (201) 944-8059



APPLICATION FOR A RENTAL CERTIFICATE

PROPERTY ADDRESS: _____ APT/UNIT # _____

PROPERTY OWNER NAME: _____

PROPERTY OWNER ADDRESS: _____

PROPERTY OWNER PHONE: _____ PROPERTY OWNER EMAIL: _____

RENTER'S NAME: _____

RENTER'S PHONE: _____ RENTER'S EMAIL: _____

SIGNATURE _____

PRINT NAME _____

FEE: \$100.00

CHECK # _____

MAKE CHECKS PAYABLE TO: PALISADES PARK FIRE PREVENTION BUREAU



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BUREAU OF FIRE PREVENTION
275 BROAD AVENUE
PALISADES PARK, NEW JERSEY 07650
PHONE: (201) 585-4132
FAX: (201) 944-8059



DWELLING LOCATION:
(NOT MAILING ADDRESS)

BLOCK: _____ LOT: _____
STREET: _____

*NOTE: ALL BOXES MUST BE CHECKD IN ORDER FOR CERTIFICATION TO BE VALID

[] **SMOKE DETECTORS SHALL BE LOCATED:**

- IF CONSTRUCTED PRIOR TO 1977 - ON EACH LEVEL OF DWELLING AND WITHIN 10 FEET OF SLEEPING AREAS. DETECTORS MAY BE BATTERY POWERED PROVIDED THEY UTILIZE A 10-YEAR SEALED BATTERY.
- IF CONSTRUCTED BETWEEN 1977 AND 1983 - 110V SMOKE DETECTOR IN THE BASEMENT, AND WITHIN 10 FEET OF ALL SLEEPING ROOMS. NO INTERCONNECTION OR BATTERY BACK-UP REQUIRED; HOWEVER, BATTERY BACKUP IS STRONGLY RECOMMENDED. BATTERY OPERATED SMOKE DETECTION IS REQUIRED ON ALL OTHER LEVELS AND SHALL UTILIZE ONLY 10-YEAR SEALED BATTERY DETECTORS.
- IF CONSTRUCTED BETWEEN 1984 AND 1989 - 110V SMOKE DETECTOR ON EACH LEVEL OF DWELLING, AND WITHIN 10 FEET OF ALL SLEEPING ROOMS. ALL SMOKE DETECTORS SHALL BE INTERCONNECTED. BATTERY BACK-UP IS NOT REQUIRED BUT IS STRONGLY RECOMMENDED.
- IF CONSTRUCTED BETWEEN 1990 AND 1992 - 110V SMOKE DETECTOR WITH BATTERY BACK-UP LOCATED ON EACH LEVEL OF THE STRUCTURE, INSIDE OF EACH SLEEPING ROOM, AND WITHIN 10 FEET OUTSIDE OF SLEEPING ROOMS. ALL SMOKE DETECTORS SHALL BE INTERCONNECTED. BATTERY BACK-UP IS REQUIRED UNLESS THE BUILDING IS FULLY SPRINKLERED. NEVERTHELESS, BATTERY BACK-UP IS STRONGLY RECOMMENDED.
- IF CONSTRUCTED BETWEEN 1993 AND 1999 - 110V SMOKE DETECTORS WITH BATTERY BACK-UP LOCATED ON EACH LEVEL OF THE STRUCTURE, INSIDE OF EACH SLEEPING ROOM, AND WITHIN 10 FEET OUTSIDE OF SLEEPING ROOMS. ALL SMOKE DETECTORS ARE TO BE INTERCONNECTED. SMOKE DETECTION IS NOT REQUIRED IN BEDROOMS IF BUILDING IS FULLY SPRINKLERED. BATTERY BACK-UP IS NOT REQUIRED IF BUILDING IS FULLY SPRINKLERED. NEVERTHELESS, BATTERY BACK-UP IS STRONGLY RECOMMENDED.
- IF CONSTRUCTED BETWEEN 2000 AND PRESENT - 110V SMOKE DETECTORS WITH BATTERY BACK-UP LOCATED ON EACH LEVEL OF THE STRUCTURE, INSIDE ALL SLEEPING ROOMS, AND WITHIN 10 FEET OUTSIDE OF SLEEPING ROOMS. ALL SMOKE DETECTORS ARE TO BE INTERCONNECTED. (NOTE: THERE ARE NO BATTERY BACK-UP EXEMPTIONS FOR A FULLY SPRINKLERED BUILDING.)

ALL BATTERY-OPERATED SMOKE DETECTORS SHALL BE OF THE 10-YEAR SEALED BATTERY TYPE AND MUST BE UL-LISTED OR ETL-LISTED.

SMOKE DETECTORS SHALL BE INSTALLED SECURELY AT THE HIGHEST POINT OF THE CEILING OR, FOR LEVEL CEILINGS, MAY BE INSTALLED ON A WALL BETWEEN 4 AND 12 INCHES BELOW THE CEILING.

ALL SMOKE DETECTORS WITH A MANUFACTURE DATE GREATER THAN 10 YEARS MUST BE REPLACED.

_____ DETECTOR DATE OF MANUFACTURE

[] **CARBON MONOXIDE DETECTORS SHALL BE LOCATED:**

- WITHIN 10 FEET OF ALL SLEEPING AREAS.
- ON EVERY LEVEL OF DWELLING.
- IMMEDIATELY OUTSIDE ANY ROOM CONTAINING A FUEL-BURNING APPLIANCE.
- IN CLOSE PROXIMITY TO THE ENTRANCE OF AN ATTACHED GARAGE.

ALL CARBON MONOXIDE DETECTORS WITH A MANUFACTURE DATE GREATER THAN 5 YEARS MUST BE REPLACED UNLESS MANUFACTURER'S LITERATURE ALLOWS FOR A LONGER PERIOD.

CARBON MONOXIDE DETECTION THAT IS PART OF A COMBINATION SMOKE/CARBON MONOXIDE DETECTOR WITH A 10-YEAR SEALED BATTERY IS GOOD FOR 10 YEARS FROM DATE OF MANUFACTURE.

_____ DETECTOR DATE OF MANUFACTURE

[] **FIRE EXTINGUISHERS**

- ONE & TWO-FAMILY HOMES AND ATTACHED SINGLE FAMILY DWELLINGS - NOT REQUIRED
- MULTI-UNIT OCCUPANCIES (E.G. HIGH-RISE AND MID-RISE APARTMENTS, GARDEN APARTMENTS, ETC.) – AN APPROVED, LISTED-TYPE ABC FIRE EXTINGUISHER MOUNTED NO MORE THAN TEN (10) FEET FROM THE KITCHEN WITH A MINIMUM RATING OF 1A:10B:C; HOWEVER, NOT REQUIRED IF THE BUILDING PROVIDES COMMON-AREA FIRE EXTINGUISHERS WITHIN 75' FEET OF TRAVEL FROM THE DWELLING UNIT.

MAIL CERTIFICATE TO: _____ PHONE #: _____

FAX #: _____

ZIP: _____

EMAIL CERTIFICATE TO: _____

CONTACT PERSON: _____ PHONE #: _____ CLOSING DATE: _____

I _____ HEREBY CERTIFY THAT AT THE ABOVE REFERENCED LOCATION, OF WHICH I AM THE OWNER, AGENT, TENANT, OR NJ LICENSED ELECTRICIAN, THE FOLLOWING ITEMS HAVE BEEN INSTALLED, MAINTAINED, AND CHECKED FOR PROPER OPERATION
IN ACCORDANCE WITH N.J.A.C. 5:70-2.3, N.J.A.C. 5:70-4.19, N.J.A.C. 5:70-3,907.21, N.J.A.C. 5:70-3,703.2.3, AND NFPA 72.

DATE

APPLICANT SIGNATURE

PRINTED NAME