



City of
Vineland
Fire Department

FIRE PREVENTION BUREAU
640 E. WOOD STREET • PO Box 1508
VINELAND, NJ 08362-1508
prevention@vinelandcity.org

ONE AND TWO FAMILY DWELLING SMOKE DETECTOR & CARBON MONOXIDE ALARM INSPECTION APPLICATION

APPLICANT INFORMATION:

ADDRESS _____

BLOCK _____ LOT _____

NAME OF APPLICANT _____

DATE OF APPLICATION _____ DATE OF SETTLEMENT _____

TYPE OF SERVICE REQUESTED: *All fees are double for 2 family dwellings.*

- 1. More than 10 business days. \$ 35.00 _____
- 2. 4 to 10 business days. *Every day except Saturday, Sunday, and* \$ 70.00 _____
- 3. 3 or less business days. *City Holidays are business days.* \$125.00 _____

Make checks payable to the City of Vineland

Signature of Applicant _____ Date

OTHER INFORMATION:

Real Estate, Title, or Mortgage Company handling sale or settlement of property: _____ Office Phone #: _____

Address: _____

Name of Person with Access to Property: _____ Contact Phone #1: _____
Contact Phone #2: _____



PAYMENT INFORMATION:

DATE _____ AMOUNT RECEIVED _____ RECEIVED BY _____

CASH _____ CHECK NUMBER _____ OTHER _____

INITIAL INSPECTION REINSPECTION

SINGLE FAMILY DWELLING TWO FAMILY DWELLING

CONTACT LOG

DATE	TIME	RESULT	INITIALS
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

INSPECTION SCHEDULED: DATE: TIME:

INSPECTION INFORMATION:

DATE INSPECTED _____ PASS _____ FAIL _____

REASON FOR FAILURE _____

Printed Name of Inspector _____ Signature of Inspector

IMPORTANT -

PLEASE NOTE

IF THE PREMISES FAILS INSPECTION, A NEW APPLICATION MUST BE COMPLETED AND AN ADDITIONAL FEE PAID PRIOR TO A REINSPECTION BEING CONDUCTED.

CODE REQUIREMENTS ARE LISTED ON THE REVERSE SIDE OF THIS FORM.

WHITE - INSPECTION COPY YELLOW - FIRE PREVENTION COPY PINK - APPLICATION COPY