

TOWNSHIP OF LAWRENCE  
 DIVISION OF HOUSING  
 2207 LAWRENCE ROAD  
 LAWRENCE TOWNSHIP, NEW JERSEY 08648  
 PHONE: 609-844-7032 FAX: 609-844-0282

**RENTAL INSPECTION APPLICATION**

**I. OWNER INFORMATION**

Name of Owner:	Phone:
Address of Owner:	

**II. PROPERTY DESCRIPTION**

Address of Property to Be Inspected:	Block:	Lot:
Approximate Age of Building:	<input type="checkbox"/> Single Family <input type="checkbox"/> Two Family	
<input type="checkbox"/> Public Water <input type="checkbox"/> Well Water	Is Public Water Connected? <input type="checkbox"/> Yes <input type="checkbox"/> No	
<input type="checkbox"/> Public Sewer <input type="checkbox"/> Septic System	Is Public Sewer Connected? <input type="checkbox"/> Yes <input type="checkbox"/> No	

**III. REALTOR/AGENT INFORMATION (If Applicable)**

Name of Realtor/Agent:	Phone Number:
Address:	Date Tenants Will Change:

**IV. SIGNATURE**

➤ It is the responsibility of the owner or the owner's agent to contact the Division of Housing in order to schedule the requested inspection. Office hours are 8:30 a.m. – 4:30 p.m. Monday through Friday. An inspection will not be scheduled until the application and fee have been received by our office. <b>NO EXCEPTIONS</b>
➤ A rental inspection is required each time there is a change in tenancy. <b>An inspection must be done before a new tenant can move in.</b>
➤ Applications <b>must be submitted</b> with the fee. Applications can be submitted in person or mailed to our office. We do not accept faxed or e-mailed applications.
➤ The Certificate of Inspection will be typed the next business day following the inspection. The certificate can be picked up in our office after 10:00 a.m. or we will mail them. We do not fax or e-mail the certificates.
Signature: X

**(Office Use Only)**

**V. PAYMENT**

Method of Payment: \$75.00 Fee Per Unit <input type="checkbox"/> Exact Cash Receipt # _____ <input type="checkbox"/> Check # _____ <input type="checkbox"/> Visa <input type="checkbox"/> Mastercard <input type="checkbox"/> Money Order # _____ <i>Make checks payable to <u>Township of Lawrence</u>. Credit cards are accepted in the office only.</i>
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**VI. INSPECTION**

Date of Inspection:	Certificate #:
Report Issued to: _____ <input type="checkbox"/> Mail <input type="checkbox"/> Pick Up	Date Issued:

**VII. OUTSTANDING PERMITS**
