

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

PROPERTY TRANSFER 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:	Single Family	Two Family
Public Water Well Water	Is Public Water Connected?	Yes No
Public Sewer Septic System	Is Public Sewer Connected?	Yes No

III. REALTOR INFORMATION (If Applicable)

Name of Realtor:	Phone Number:
Address:	Closing Date:

IV. Please read and then sign below.

➤ A Certificate of Inspection expires one year from the original inspection date.
➤ Applications <u>must be submitted</u> with the fee. Applications can be submitted in person or mailed to our office. We do not accept faxed or e-mailed applications. An inspection will not be scheduled until the application and fee have been received by our office. <u>NO EXCEPTIONS</u>
➤ It is the responsibility of the owner or the owner's agent to contact the Division of Housing to schedule the inspection. Office hours are from 8:30 a.m. – 4:30 p.m. Monday through Friday.
➤ 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: \$80.00 Fee <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 Township of Lawrence. Credit cards are accepted in the office only.</i>

VI. INSPECTION

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

VII. OUTSTANDING PERMITS
