



# TOWNSHIP OF EDISON

DEPARTMENT OF PUBLIC SAFETY  
MAYOR THOMAS LANKEY

100 MUNICIPAL BLVD  
EDISON, NEW JERSEY 08817



BELOW ARE THE RESPONSES TO THE CURRENT EMAIL AND HOTLINE QUESTIONS  
REGARDING COVID-19

- THE CDC PROTOCOL FOR COVID19 SYMPTOMS AND TESTING CAN BE VIEWED AT THE FOLLOWING LINK

<https://www.cdc.gov/coronavirus/2019-ncov/symptoms-testing/testing.html>

- TO CHECK FOR AVAILABILITY OF SENIOR TRANSPORTATION OR DELIVERY SERVICES PLEASE CALL 732-248-7345
- EDISON CERTIFICATE OF CONTINUED OCCUPANCY FOR CHANGE OF OWNERSHIP, TENANCY AND NAME GUIDE LINES DURING COVID-19 EVENT

Go to Edison Township website [edisonnj.org](http://edisonnj.org)

Go to Forms

Go to CCO form, Residential or Commercial

Print Form

Fill out form as applicable

Go to waiver form

Print waiver form

Fill out form as applicable

Seller and Buyer to certify form and have it notarized for each

Fax forms to office or email forms to all three of the following:

[Pleary@edisonnj.org](mailto:Pleary@edisonnj.org); [jmasters@edisonnj.org](mailto:jmasters@edisonnj.org); [dangelo@edisonnj.org](mailto:dangelo@edisonnj.org)

The Code Office will process and call for payments by credit card

The Code Office will process and email or fax the CCO as required

PLEASE NOTE THE SELLER, BUYER AND OR AGENT SHOULD INSPECT THE STRUCTURE FOR WORK WHICH HAS BEEN DONE WHICH REQUIRED PERMITS. THE SELLER SHOULD APPLY FOR THE PERMITS AND AGAIN EMAIL OR FAX THE FILLED OUT JACKET AND TECH CARDS TO THE ABOVE EMAIL ADDRESSES. THE OFFICE WILL PROCESS SAME AND CALL FOR PAYMENT ANDS AT THE TIME SCHEDULE AN INSPECTION IF REQUIRED.

- THE NEW JERSEY DIVISION OF MOTOR VEHICLE OFICES ARE CURRENTLY CLOSED BELOW IS THE ADVISORY REGARDING EXTENSIONS AND WAIVERS.



# TOWNSHIP OF EDISON

DEPARTMENT OF ENGINEERING  
DIVISION OF CODE ENFORCEMENT  
JOHN SOLTESZ  
CONSTRUCTION OFFICIAL

100 MUNICIPAL BLVD  
EDISON, NEW JERSEY 08817  
PHONE: 732.248.7257  
FAX: 732.248.1606

## CHECK LIST FOR RESIDENTIAL CONTINUED CERTIFICATE OF OCCUPANCY

**INSPECTION TIME IS BETWEEN 8:30 AM – 2:30 PM**

**\*\* Inspection is required to be completed minimum of 4 weeks prior to closing date\*\***  
Prior to inspection, check with the Township Building Department for any open permits; check with the Tax Assessor's office to see that all improvements in the property are being assessed accordingly. Items that are not on the township record may require permits, even if installed by previous owner, the current owner is responsible to resolve.

- ❖ The following needs to be structurally-sound and verified by both Zoning & Building permits, as required with Certificates:
  - Addition / Alteration / Finished Basement / Finished Attic / Garage conversion
  - Patio / Deck / Pool / Spa
- ❖ Fence and childproof gate is required for all properties with a pool and/or spa.
- ❖ All handrails and guardrails must be secure and of proper height.
- ❖ Risers (for stairs) where required, must have openings less than 4 inches.
- ❖ Water Heater, Furnace, Air conditioner, Boiler, etc., require permits to install or replace and must be in working order.
- ❖ Water Heater must have pressure relief valve, bonding cable, pressure relief piping (cannot be black pipe), terminating 6 inches from the floor, unthreaded.
- ❖ All flue connections of oil/gas fired appliances must be secure and tight.
- ❖ Clothes dryer must be vented outside the house (not into garage, attic, basement, etc.)
- ❖ Gas appliances must have shut-off valves.
- ❖ Combustible assembly—no openings in garage ceilings and walls adjacent to living space.
- ❖ House numbers must be located in front of house, minimum of 3 inches high.
- ❖ If there are existing GFI (Ground fault Interrupter) outlets, they must be in working order.
- ❖ No junk or debris in basement, attic or yard; Items for storage/moving are allowed.
- ❖ No keyed locks in bedrooms.
- ❖ Egress door (s) should not have a keyed inside lock.
- ❖ No imminent hazards on premises that might endanger occupants or the general public.
- ❖ **Any other concerns or elements deemed necessary by the Municipal Inspector.**

**All of the above items must be met prior to the issuance of the CCO.** If any work was performed without a permit and one was required, you will be required to obtain the permit and close it before the CCO will be issued. By issuance of this Certificate of Occupancy, neither the Township of Edison nor any of its Officers and Inspectors assumes any liability.



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## RESIDENTIAL CERTIFICATE OF CONTINUED OCCUPANCY APPLICATION

APPLICATION DATE: \_\_\_\_\_

Fee: \$150 payable to EDISON TOWNSHIP by: check or credit card. No cash. No refunds.

Inspection should be completed a minimum 3 weeks prior to closing.

Office Use Only:
Inspection Date: _____
CCO #: _____

## PROPERTY INFORMATION

BLOCK: \_\_\_\_\_ LOT: \_\_\_\_\_ SINGLE FAMILY \_\_\_\_\_ TWO FAMILY \_\_\_\_\_ MULTI-FAMILY \_\_\_\_\_

DWELLING TO BE: BUYER OCCUPIED \_\_\_\_\_ REHAB \_\_\_\_\_ TO BE DEMOLISHED \_\_\_\_\_

PROPERTY ADDRESS: \_\_\_\_\_

PROPERTY'S OWNER'S NAME: \_\_\_\_\_

APPLICANT NAME, IF NOT OWNER: \_\_\_\_\_

APPLICANT PHONE NUMBER: \_\_\_\_\_ TENTATIVE CLOSING DATE: \_\_\_\_/\_\_\_\_/\_\_\_\_

BUYER NAME: \_\_\_\_\_ PHONE: \_\_\_\_\_

CURRENT ADDRESS: \_\_\_\_\_ CITY: \_\_\_\_\_ STATE \_\_\_\_\_

SELLER ATTORNEY NAME: \_\_\_\_\_ PHONE: \_\_\_\_\_

SELLER AGENT NAME: \_\_\_\_\_ PHONE: \_\_\_\_\_

BUYER ATTORNEY NAME: \_\_\_\_\_ PHONE: \_\_\_\_\_

BUYER AGENT NAME: \_\_\_\_\_ PHONE: \_\_\_\_\_

APPLICANT SIGNATURE \_\_\_\_\_

Note: If any work requiring a permit was completed, a compliance permit must be obtained work must be inspected and permit closed before CCO will be issued.

Note: As per Edison Township Ordinance 14-1.6 a Certificate of Continued Occupancy must be obtained prior to closing of the property. Failure to do so will result in penalties and fines up to \$2,000 as per N.J.S.A 40:49-5; 1999 Code § 1.08.010



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Application for Residential Certificate of Continued Occupancy

### Property Information

Address \_\_\_\_\_

Block: \_\_\_\_\_ Lot: \_\_\_\_\_

Type of Structure: \_\_\_\_\_

Owner's Name: \_\_\_\_\_

Applicant Name if Not Owner: \_\_\_\_\_

Applicant Phone Number: \_\_\_\_\_

Applicant Email: \_\_\_\_\_

Closing date: \_\_\_\_\_

Seller Attorney: \_\_\_\_\_ Phone: \_\_\_\_\_

Buyer Attorney: \_\_\_\_\_ Phone: \_\_\_\_\_

### Check the following as applicable:

- Smoke Detectors on each level of dwelling
- Smoke Detector and Carbon Monoxide Alarm outside each sleeping Area, within 10 feet
- All smoke detectors are in working order
- All carbon monoxide alarms in working order
- A 2A:10BC Fire Extinguisher is mounted within 10 feet of the kitchen
- Note: All battery powdered detectors and or alarms must have 10 year Sealed batteries

No work has been done in the above dwelling that requires a UCC Permit Or a Zoning Permit

- The exterior of the dwelling is not in disrepair
- All grounds are trimmed and no debris is present
- All concrete, asphalt and masonry work is not in disrepair

I, \_\_\_\_\_ seller's name from above print name \_\_\_\_\_ sign,

Certify that the above are as per the Edison Township ordinances and codes and Understand that I can be prosecuted and fined \$2,000.00 per occurrence regarding the Above, and for false and fictitious statements per occurrence.

I, further hereby certify that the foregoing statements made by me are true. I am aware that if any of the foregoing statements made by me are willfully false and I will be subject to penalty.

Sworn and subscribed to before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

Notary Signature \_\_\_\_\_ Applicant Signature \_\_\_\_\_

Print Signature \_\_\_\_\_

Application for Residential Certificate of Continued Occupancy – Page 2

Buyer's Name \_\_\_\_\_

Buyer's current address \_\_\_\_\_

Buyer's Phone Number \_\_\_\_\_

Buyer's email \_\_\_\_\_

I, \_\_\_\_\_ buyer's name from above \_\_\_\_\_

Sign, certify that the above are as per the Edison Township ordinances and codes and understand that I can be prosecuted and fined \$2,000.00 per occurrence regarding the above, and for false and Fictitious statements per occurrence.

I, further hereby certify that the foregoing statement made by me are true. I am aware that if any Of the foregoing statements made by me are willfully false and I will be subject to penalty.

Sworn and subscribed to before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_

Notary Signature \_\_\_\_\_ Applicant Signature \_\_\_\_\_

Print Signature \_\_\_\_\_