

**MONTAGUE TOWNSHIP  
FIRE PREVENTION BUREAU**

277 Clove Road Montague, NJ 07827  
Office: 973-293-3366 Fax: 973-293-8258  
Matthew Kansky, Fire Marshal  
[mkansky@montaguenj.org](mailto:mkansky@montaguenj.org)

**INSPECTION APPLICATION - SMOKE DETECTOR – CARBON MONOXIDE  
PORTABLE FIRE EXTINGUISHER**

DATE OF APPLICATION: \_\_\_\_\_ RESALE \_\_\_\_\_ RENTAL \_\_\_\_\_ **(Please check one)**

DATE OF CLOSING: \_\_\_\_\_ DATE OF LEASE: **Begin:** \_\_\_\_\_ **End:** \_\_\_\_\_

We the undersigned do hereby make application in accordance with the Uniform Fire Safety Act PL 1991, Chapter 92, whereby we request an inspection of the smoke detection system in the below referenced property.

**(A valid mailing address must be submitted for current owner, new owner and tenant)**

Property Address: \_\_\_\_\_ Unit# \_\_\_\_\_ Block \_\_\_\_\_ Lot: \_\_\_\_\_

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

Mailing Address: \_\_\_\_\_

Buyer/Tenant's Name \_\_\_\_\_ Phone: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Number of people to reside in unit: \_\_\_\_\_

Name: \_\_\_\_\_ Age: \_\_\_\_\_ Name: \_\_\_\_\_ Age: \_\_\_\_\_

Fees: \$35.00 Request received **more than 10 business days** prior to the change of occupant.  
\$70.00 Request received **4 to 10 business days** prior to the change of occupant.  
\$125.00 Request received **fewer than 4 business days** prior to the change of occupant.

Note: \$50.00 Re-inspection fee for all units that fail the inspection.

**Payment to be made payable to the Montague Township Fire Prevention  
And must be submitted with this application.**

**FOR OFFICE USE ONLY**

PAYMENT RECEIVED:

Fees Remitted \$ \_\_\_\_\_ Cash \_\_\_\_\_ Check No. \_\_\_\_\_

Collected By: \_\_\_\_\_ Date: \_\_\_\_\_