



Township of Belleville

152 Washington Avenue
Belleville, New Jersey 07109
(973) 450-3410 • Fax (973) 450-9309

FRANK DeLORENZO, JR.
CHIEF ADMINISTRATOR
CONSTRUCTION OFFICIAL
ZONING OFFICER

CODE ENFORCEMENT
DEPARTMENT
BUILDINGS
PLUMBING
ELECTRICAL
FIRE
ZONING
PLANNING
MAINTENANCE

1 FAMILY- \$150.00
2 FAMILY- \$225.00
3 FAMILIES

GUIDELINES FOR CONTINUED CERTIFICATE OF OCCUPANCY

- AT LEAST ONE PORTABLE FIRE EXTINGUISHER SHALL BE INSTALLED IN ALL ONE AND TWO FAMILY DWELINGS.
- CARBON MONOXIDE DETECTORS IN ALL FUEL BURNING AREAS. (ON ALL LEVELS)
- SMOKE DETECTORS UP AND IN WORKING ORDER.
- OUTSIDE OF PROPERTY CLEAN OF TRASH DEBRI, HIGH GRASS AND WEEDS, NO ACCUMULATION OF ANY KIND OUTSIDE OF DWELING, NO PEELING OR CHIPPING OF PAINT.
- FOUNDATION WALLS SHALL BE FREE FROM OPEN CRACKS, BREAKS AND SHALL BE KEPT IN GOOD CONDITION.
- ALL EXTERIOR WALLS SHALL BE FREE FROM HOLES, BREAKS, LOOSE OR ROTTING MATERIAL AND MAINTAINED, WEATHERPROOF.
- ROOF DRAINAGE, ROOF DRAIN, GUTTERS AND DOWN SPOUTS SHALL BE IN GOOD CONDITION.
- HANDRAILS REQUIRED ON 3 OR MORE RISERS, PROPERLY SECURED (INTERIOR AND EXTERIOR), EVERY EXTERIOR AND INTERIOR FLIGHT OF STAIRS AND EVERY OPEN PORTION OF STAIR LANDING, BALCONY, DECK SHALL HAVE A GUARDRAIL.
- TAILPIPE ON HOT WATER HEATER MAXIMUM 6" OFF GROUND.
- ELECTRICAL FIXTURE SHALL BE SECURED (OUTLET COVER, SWITCH PLATE COVER).

Where to Locate Detectors

Detectors are to be located on every level of residence, basement, first floor, second floor, excluding crawl spaces and unfurnished attics and in every separate sleeping area, between sleeping areas and living areas such as kitchen, garage, basement, or utility room. In homes with only one sleeping area on one floor, a detector is to be put in the hallway outside the bedrooms as shown in figure 1. In single floor homes with two separate sleeping areas, two detectors are required outside each sleeping area as shown in figure 2. In multi-level homes, detectors should be located outside sleeping areas and at every finished level of the home as shown in figure 3. Basement level detectors should be located at the bottom of basement stairwells as shown in figure 4.

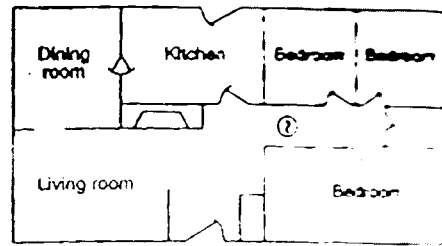


Figure 1.

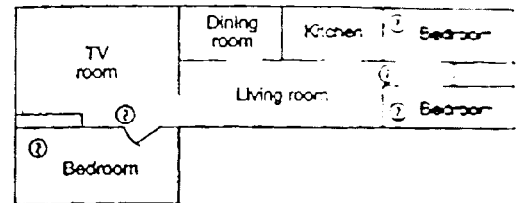


Figure 2.

Where not to locate Smoke Detectors:

To avoid false alarms or improper operations, avoid installation of smoke detectors in the following areas:

Kitchens: Smoke from cooking may cause a nuisance alarm.

Bathrooms: Excessive steam from shower may cause a nuisance alarm.

Forced Air Ducts used for heating and air conditioning: Air movement may prevent smoke from reaching detector.

Near Furnaces of any type: Air and dust movement and normal combustion products may cause nuisance alarms.

"The Dead Air Space" where the ceiling meets the wall as shown in figure 5.

The Peak of an A-Frame Type Ceiling:

Dead Air at the top may prevent smoke from reaching detector.

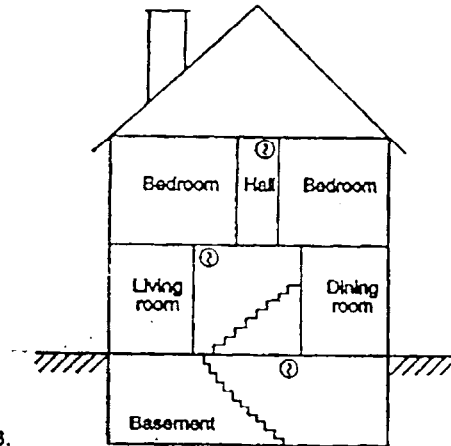


Figure 3.

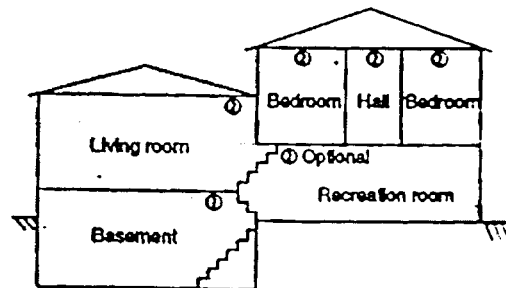
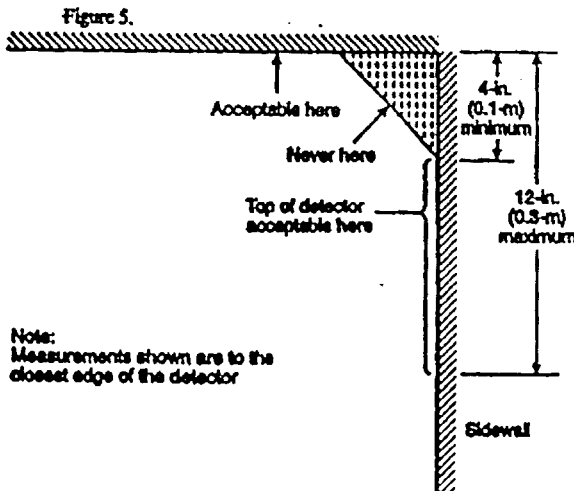


Figure 4.

④ Indicates required smoke detector



Note: Measurements shown are to the closest edge of the detector

Two (2) Family Dwellings

Smoke detectors shall be in The basement area, in the Vicinity of the bedrooms, And also front hallway and Back hallway on each level.

CODE ENFORCEMENT DEPARTMENT

The Legislature amended and enacted P.L. 1991.c92(C52-27D-198.1) requiring that all one and two-family dwellings at a change of occupancy be provided with a portable fire extinguisher in addition to the requirements for smoke and carbon monoxide detectors. This provision does not apply to seasonal rental units. This act was signed into law on April 14, 2005 with an effective date of November 1, 2005.

The regulations were recently made available for public comment. The comment period has ended and the final adoption of the regulations will appear in the New Jersey Register in the near future. The Division of Fire Safety is advising all local enforcing agencies to enforce the regulations; using the guidelines below.

The requirements for the type and placement of the extinguishers are as follows:

- 1) At least one portable fire extinguisher shall be installed in all one and two family dwellings (except seasonal rental units) upon change of occupancy;
- 2) The extinguisher shall be listed, labeled, charged and operable;
- 3) The size shall be no smaller than 2A.10B:C, rated for residential use and weigh no more than 10lbs.
- 4) The hangers or brackets supplied by the manufacturer must be used;
- 5) The extinguisher must be located within 10 feet of the kitchen;
- 6) The top of the extinguisher must not be more than 5 feet above the floor;
- 7) The extinguisher must be visible and in a readily accessible location, free from being blocked by furniture, storage or other items;
- 8) The extinguisher must be near a room exit or travel path that provides an escape route to the exterior;
- 9) The extinguisher must be accompanied by an owner's manual or written information regarding the operation, inspection, and maintenance of the extinguisher and;
- 10) Lastly the extinguisher must be installed with the opening instructions clearly visible.

New fire extinguishers are not required to be serviced and tagged, as long as the seller or agent can provide proof of purchase or receipt.

Until the proposed regulations have been adopted, the statute should be cited for enforcement purposes. The correct citation is N.J.S.A. 52:27D-198.1.

If you have any questions regarding the implementation of this act or its specific requirements, please contact our Local Assistance Unit at 609-633-6112.



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CODE ENFORCEMENT DEPARTMENT

APPLICATION FOR A CONTINUED CERTIFICATE OF OCCUPANCY ON A RE-SALE OF A RESIDENTIAL DWELLING

DATE OF INSPECTION _____ (FOR OFFICE USE)

FEE REMITTED \$ _____

VISA, MASTERCARD, DISCOVER,
AMEX

() CHECK # _____

COLLECTED BY _____

DATE _____

BLOCK _____ LOT _____

ONE _____ TWO _____ THREE _____

\$100 \$150 \$200

EACH ADDITIONAL UNIT IS \$ 50.00
RE-INSPECTION _____

STREET ADDRESS: _____

NAME OF OWNER: _____

PHONE # () _____ BUSINESS # () _____

NAME, ADDRESS AND PHONE # OF APPLICANT IF DIFFERENT FROM OWNER:

**HAS THE ABOVE PREMISES BEEN THE SUBJECT OF ANY PRIOR APPLICATION TO THE ZONING
BOARD OF ADJUSTMENT OR PLANNING BOARD TO THE APPLICANT'S KNOWLEDGE?**

DATE: _____ APPLICANT: _____

NAME AND ADDRESS OF POTENTIAL BUYER: _____

PURCHASE PRICE \$ _____



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CODE ENFORCEMENT DEPARTMENT

SMOKE DETECTOR/CARBON MONOXIDE COMPLIANCE APPLICATION ORDINANCE # 2572

DATE: _____

ADDRESS: _____

OWNER OF PROPERTY: _____

TELEPHONE # () _____ WORK # _____

REQUESTED BY: _____ OWNER _____ PURCHASER _____

USE GROUP: (1) FAMILY _____ (2) FAMILY _____
\$25.00 \$50.00

SIGNATURE OF APPLICANT:



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FEE: \$25.00

ZONING PERMIT

ZONING OFFICER: FRANK DeLORENZO, JR

COMPLETE APPLICATIONS MUST INCLUDE PLANS IN ACCORDANCE WITH THE
INSTRUCTION SHEET AND APPLICABLE FEES:

X	MINOR RESIDENTIAL ALTERATION	ALTERATIONS TO MULTI-FAMILY AND/OR	APPL. NO: _____
	RESIDENTIAL	NON-RESIDENTIAL STRUCTURES: SIGNS	DATE: _____
	RESIDENTIAL ALTERATION	NEW NON-RESIDENTIAL STRUCTURE CONSTRUCTION BLOCK:	_____
	NEW SINGEL-FAMILY STRUCTURE	CERTIFICATE OF NON-CONFORMITY	LOT: _____
	NEW MULTI-FAMILY STRUCTURE	CHANGE OF OCCUPANCY	
	NEW TWO-FAMILY STRUCTURE	OTHER DESCRIBE: _____	

APPLICANT'S NAME: _____ TELEPHONE # _____

APPLICANT'S ADDRESS: _____

PROPERTY OWNER'S NAME: _____

PROPERTY OWNER'S ADDRESS: _____

LOCATION OF PROPERTY FOR WHIH ZONING PERMIT IS DESIRED: ZONE: _____

STREET ADDRESS: _____ BLOCK _____ LOT _____

USE OF PROPERTY: COMMERCIAL _____ OFFICE _____ INDUSTRIAL _____ OTHER _____

DESCRIBE PRESENT USE: _____

DESCRIBE PROPOSED USE: _____

DESCRIBE PROPOSED CONSTRUCTION, ALTERATIONS, ADDITIONS OR CHANGES AT THE

SUBJECT SITE: _____

IS A CHANGE OF OCCUPANCY OR TENANCY INVOLVED IN THIS APPLICATION: YES _____ NO _____

IF YES, DESCRIBE: _____

DO YOU PRESENTLY OWN OR HAVE YOU EVER OWNED PROPERTY ADJACENT TO THE SUBJECT SITE:

YES: _____ NO: _____

HAS THE PREMISES BEEN THE SUBJECT OF PRIOR APPLICATION TO THE ZONING BOARD OF ADJUSTMENT OR

PLANNING BOARD TO THE APPLICANTS KNOWLEDGE: YES _____ NO _____

IF YES, STATE DATE: _____ BOARD: _____ RESOLUTION # _____

DISPOSITION OF APPLICATION: _____

ALL APPLICATIONS MUST BE SIGNED: _____

APPLICANT SIGNATURE: _____ PRINT NAME: _____

PROPERTY OWNER SIGNATURE OR DESIGNATED AGENT _____ PRINT NAME: _____

OFFICE USE ONLY:

BASED ON THE INFORMATION SUBMITTED AND THE REQUIREMENTS OF THE TOWNSHIP ZONING ORDINANCE, YOUR

APPLICATION FOR ZONING PERMIT IS: APPROVED: _____ DENIED _____

COMMENTS OF CODE OFFICIAL: _____

ZONING OFFICER, FRANK DeLORENZO, JR _____ DATE: _____