



Borough of Seaside Park

CODE ENFORCEMENT OFFICE

732-793-5100
Fax 732-375-3058

The Family Resort

313 SW Central Ave. • Seaside Park, New Jersey 08752

TITLE TRANSFER / CERTIFICATE OF CONTINUED OCCUPANCY

Application No. TT- _____

PROPERTY INFORMATION.

Property Address: _____ Block _____ Lot _____

Zoning District: _____ R _____ BU _____ MX _____ MD _____ B _____ P

Lot Dimensions: _____ Lot Area: _____

Present Use of Property & Total Number of Dwelling Units on Property:

_____ Single Family Residence _____ Two Family Residence _____ Multiple Dwelling Unit: _____ Number of Units

NJ Department of Community Affairs, Multiple Dwelling Unit Registration No: _____

If the property contains **more than** two (2) dwelling units under the same roof, the property must be registered as a multiple dwelling unit in accordance with N.J.S.A. 46:8-28.

_____ Hotel/Motel # of Efficiencies _____ # of Rooms _____

_____ Commercial _____ Mixed Use: # of Dwelling Units _____ # of Commercial Units _____

APPLICANT/PROPERTY OWNER (Seller)

PROPERTY OWNER (Buyer)

Name _____

Name _____

Address _____

Address _____

Telephone _____

Telephone _____

CONTACT FOR SCHEDULING INSPECTION

Name _____

Preferred Date for Inspection: _____

Address _____

Telephone: _____

APPLICANT CERTIFICATION I hereby certify that the above statements and information included on this application are true.

_____ Applicant is Property Owner

_____ Applicant is Authorized Agent _____

Signature

Date

For Office Use Only:

Date Received: _____ By: _____

Fee Calculation: No. Of Dwelling Units _____ @ \$100.00= \$ _____ Cash _____ Check No. _____

INSPECTION CHECKLIST

Number of Dwelling Units: _____ Hotel/Motel Rooming House: _____ Apartments _____ Efficiencies _____ Rooms

Previous Title Transfer Inspections _____ Rental Permits _____ Water-Sewer Utility _____ Tax Assessment _____

Seal Legend - Trinity

Land - Beach Plum

Sea - Striped Bass

Air - Sea Gull

TITLE TRANSFER INSPECTION REPORT

The following deficiencies were noted during the Title Transfer inspection at the referenced property:

_____ The Title Transfer Permit has been APPROVED. Occupancy for rental purposes requires a Rental Permit issued by the Borough of Seaside Park.

_____ The Title Transfer Permit has been CONDITIONALLY APPROVED provided these deficiencies are corrected within:

_____ SEVEN (7) DAYS _____ FOURTEEN (14) DAYS _____ THIRTY (30) DAYS _____ DAYS

_____ NO RE-INSPECTION REQUIRED _____ RE-INSPECTION REQUIRED (Call for appointment)

_____ The Title Transfer Permit has been DENIED. These deficiencies must be corrected before the premises will be approved for Title Transfer. Application for re-inspection must be made before a Title Transfer Permit will be approved.

Zoning Officer

Date

Code Enforcement Officer

Date