



**REQUEST FOR**  
**SMOKE/CARBON MONOXIDE DETECTOR/**  
**FIRE EXTINGUISHER and/or**  
**ZONING COMPLIANCE**  
**CERTIFICATION INSPECTION**  
**FOR SALE OF PROPERTY**

Address of Property: \_\_\_\_\_

Block: \_\_\_\_\_ Lot: \_\_\_\_\_ Qualifier: \_\_\_\_\_ Floor: \_\_\_\_\_

Date of Final CO (Year Built): \_\_\_\_\_ Current Owner/Seller: \_\_\_\_\_

Buyer: \_\_\_\_\_

Address of Buyer: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip code: \_\_\_\_\_

Phone: (    ) \_\_\_\_\_

Smoke Detectors Yes: \_\_\_\_\_ No: \_\_\_\_\_ Type: Elec \_\_\_ Battery \_\_\_\_\_ Elec/Batt \_\_\_\_\_

Carbon Monoxide Detector required Yes: \_\_\_ No: \_\_\_\_\_ Installed Yes: \_\_\_\_\_ No: \_\_\_\_\_

Fire Extinguisher Required: Minimal Rating/Classification 2A: 10BC Yes: \_\_\_\_\_ No: \_\_\_\_\_

Requesting Zoning Compliance Certificate inspection w/smoke certification? Yes: \_\_\_\_\_ No: \_\_\_\_\_

Requesting Zoning Compliance Certificate inspection only? Yes: \_\_\_\_\_ No: \_\_\_\_\_

**Zoning Compliance Certificate are for homes built after January 1,1996**

Realtor: \_\_\_\_\_ Agent: \_\_\_\_\_

Realtor Phone: \_\_\_\_\_ Realtor Fax: \_\_\_\_\_

Title Company for Settlement \_\_\_\_\_

DATE & TIME REQUESTED FOR INSPECTION: \_\_\_\_\_  
(Monday –Friday, 9AM-4PM)

DATE OF SETTLEMENT: \_\_\_\_\_

Please complete this form **entirely** and accurately.

**Payment for Zoning Compliance Certificate is due prior to inspection or inspection will NOT be done. \$100.00 for Zoning Compliance inspection with or without Smoke/CO/Fire Extinguisher inspection (Re-Inspection fees do apply- see Vol I Chap. XXX Schedule L); Smoke/CO/Fire Extinguisher inspection only \$50.00.**

Please make check or money order payable to *City of Ocean City*.

If you need to contact us, please call (609) 399-6111, ext. 9727.

**FAX RETURN THIS FORM TO (609) 525-2496 AT LEAST 14 DAYS IN ADVANCE**

Rev 09-01-2010