



TOWNSHIP OF FREEHOLD
APPLICATION FOR RESIDENTIAL
CERTIFICATE OF CONTINUED OCCUPANCY (C.C.O.)
DEPARTMENT OF HOUSING & ZONING ENFORCEMENT

1 Municipal Plaza, Freehold, NJ 07728
(732)294-2066 or (732) 294-2050 / Housing@twp.freehold.nj.us

C.C.O. INSPECTION FEE (Non-Refundable)

\$150.00 - Single Family Homes, Townhouses, Condominiums (Stonehurst, Raintree, Deerbrook, Poets Corner, Wyndham, Independence Sq, Briarwood, etc.)

\$75.00 – Silvermead and Apartments (Eagle Rock, Chesterfield, The Edge, Applewood, Wemrock Senior Living, Heritage Village at Elton Corner, etc.)

PAYMENT: Check or Money Order **ONLY** made payable to “Township of Freehold”. This fee includes initial inspection and one re-inspection.

NOTE: ALL ADDITIONAL RE-INSPECTIONS WILL COST \$65.00 EACH.

Please also complete the application for a Fire inspection. It is a separate application and separate check or money order for \$45.00.

REASON FOR CHANGE OF OCCUPANCY: (Please check one) **SALE** _____ **RENTAL** _____

ADDRESS OF PROPERTY:	
-----------------------------	--

BLOCK:		LOT:	
---------------	--	-------------	--

Type of Structure: Single Family Home _____ Townhouse _____ Condo _____ Apartment _____ Manufactured Home _____

IF SELLING, was the address a Rental Property? YES _____ NO _____ *If YES, the landlord registration will be deactivated for the property.*

Please print clearly. The Inspection results and the certificate will be sent via email.

Buyer Name(s) or Occupant(s):	
Phone #:	
Email:	

Property Owner Name(s):	
Phone #:	
Email:	

Realtor/Contact Name:		Phone #:	
Email:			

Please check: City Water _____ City Sewer _____ *Septic _____ *Well _____

**Must be approved by the Health Department located in the Town Hall building or call 732-294-2060.*

****RENTALS ONLY****

Is the address registered as a Rental Property? YES _____ NO _____

If YES, Landlord ID #: _____ Registration #: _____

If NO, please complete the Rental Property Application and a fee may be required.

Applicant's Signature

Date

****FOR OFFICE USE ONLY****

Fee Received By:	Application #:
Check or Money Order #:	
Inspection Date:	Granted: ☐ Denied: ☐ Other: ☐
Re-inspection Date:	Granted: ☐ Denied: ☐ Other: ☐