

**Bureau of Fire Prevention
Fire District #2
Township of Old Bridge**



**3098 Highway 516
Old Bridge, NJ 08857
Phone: 732-970-6542
info@obfd2.com**

Date: _____

From: _____

By receipt of this letter, we are requesting your office to perform inspections of the apartment units listed below for conformance with the NJ Uniform Fire Code 5:70-2.1(b).

We would like the inspection to take place on _____.

Enclosed please find payment in the amount of _____.

Building # or Letter	Apartment # or Letter	Pass	Fail
1.			
2.			
3.			
4.			
5.			
6.			
7.			
8.			
9.			
10.			
11.			
12.			
13.			
14.			
15.			
16.			
17.			
18.			
19.			
20.			

\$50.00 Inspections conducted on ten (10) business days notice or more

\$75.00 Inspections conducted on less than ten (10) but more than four (4) business days notice

\$125.00 Inspections conducted on four (4) business days or less notice

ALL REINSPECTIONS SHALL CARRY A FEE OF \$35.00 FOR EACH RETURN INSPECTION. HOLIDAYS & WEEKENDS DO NOT COUNT AS BUSINESS DAYS.

PAYMENT MUST BE MADE PRIOR TO INSPECTION. APPLICATIONS AND/OR PAYMENTS RECEIVED AFTER 3:00 PM WILL BE CONSIDERED THE NEXT BUSINESS DAY. PAYMENTS: CHECK, MONEY ORDER OR CREDIT CARD. NO CASH. *PLEASE NOTE THERE WILL BE A 4% CONVENIENCE FEE FOR ALL CREDIT CARD TRANSACTIONS.

Signed: _____

(Office Use Only) Method of Payment: Check: _____ Date: _____ Amount: _____