

TOWNSHIP OF LAWRENCE
DIVISION OF HOUSING
P.O. BOX 6006
LAWRENCEVILLE, NEW JERSEY 08648
PHONE: (609) 844-7032
FAX: (609) 844-0282

PROPERTY TRANSFER APPLICATION

I. OWNER INFORMATION

Name of Owner _____ Phone _____

Address of Owner _____

Address of Property to be Inspected _____

Block _____ Lot _____ Date of Transfer (*Closing Date*) _____

Name, Address, and Phone Number of Realtor _____

II. PROPERTY DESCRIPTION

Approximate Age of Building _____

Please Circle One: Single Family Dwelling / Two Family Dwelling / Condo / Townhouse

Please Circle One: Public Water / Well Water Is Public Water Connected? yes / no

Please Circle One: Public Sewer / Septic System Is Public Sewer Connected? yes / no

NOTE: IT IS THE RESPONSIBILITY OF THE APPLICANT OR THE REALTOR TO CONTACT THE DIVISION OF HOUSING IN ORDER TO SCHEDULE THE REQUESTED INSPECTION. AN INSPECTION WILL NOT BE SCHEDULED UNTIL OUR OFFICE HAS RECEIVED THE FEE AND APPLICATION.

FEE: \$ 80.00

Please Make Checks Payable to Township of Lawrence

Signature

Date

Date of Inspection _____

Report Issued to _____

Date Issued _____

Certificate Number _____

DONALD ARRISON
Housing Inspector

OUTSTANDING PERMITS: _____
