

BOROUGH OF RIVER EDGE Stephen Depken, Construction Official **BUILDING DEPARTMENT** 201-599-6322

APPLICATION FOR CERTIFICATE OF RESALE RESALE OF RESIDENTIAL DWELLING PLEASE PRINT CLEARLY INFORMATION REQUESTED BELOW

Property Address: _			
Block:	Lot:	Closing Date:	
() Single Family Dwelling() Two Family Dwelling		# of u	nits if more than 3 Family
() Three or more	family dwelling	Number of persons	to occupy dwelling:
Name of property o	wner(Seller):		
Tel #:	Email Address:		
New mailing addres	s:	- M. C. Marie	
Name of Buyer:			
Present Address:			
Contact Person:	Contact #:		
Office Use Only:			
Payment:	Cash	Check#	Application#
Inspection date:		Sump Pump:	YESNO
Passed	Failed	edSignature of Inspector:	
Comments			