



TOWN OF CLINTON

INCORPORATED APRIL 5, 1865

43 Leigh St., P.O. Box 5194

Clinton, N.J. 08809-5194

(908) 735-8616 FAX (908) 735-8082

Town of Clinton Construction Records Clearance Application

Application Fee: \$100.00 within 25 days of Closing

Application Fee: \$150.00 within 10 days of closing

Seller name: _____

Mailing Address: _____

City _____ State _____ Zip _____

Phone () _____

Property Address _____

Block _____ Lot _____ Approx. Year Built _____

() Single family () Two family () Condominium () 3+ Family () Commercial

Please answer the following questions:

Swimming Pool on Site () No () Yes, if yes, is there a pool barrier on property () Yes () No

Did you install or replace any of the following: Water Heater () HVAC () Woodstove () Fireplace insert ()

Did you construct or install any of the following:

Deck () Hot Tub () Shed or outbuilding () Alarm System () Finished a basement area ()

Have you filed a Smoke, Carbon Monoxide and fire extinguisher permit () Yes () No

Contact person _____ Phone # _____

Address _____

Closing date: _____

I hereby certify that I am the (agent) owner of record and am authorized to make this application I further certify that all information is true and accurate.

Signature _____

Date _____

OFFICE USE:

Do Not Write below this Line

Amount Paid _____ **Cash** _____ **Check #** _____ **Date** _____

Open permits Yes or No If yes, permit #'s _____

Certificate of Records Clearance # _____

Date Issued: _____