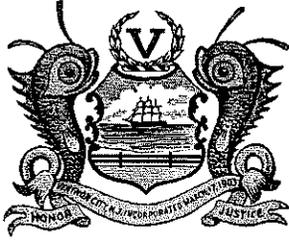


DEPARTMENT OF BUILDING SAFETY
&
FLOOD PLAIN MANAGEMENT

VENTNOR CITY HALL
6201 ATLANTIC AVENUE
ROOM 4
823-7987
823-7966 FAX



VENTNOR CITY, N.J. 08406

Rental-Sale Affidavit

Date: ___/___/___

Property Address: _____

Please check one of the following:

- Rental:** The owner and/or agent of the above referenced property certifies that all smoke and carbon monoxide detectors are in working order.

- Sale:** The owner and/or agent of the above referenced property certifies that all smoke and carbon monoxide detectors are in working order and the property has provided and ABC type fire extinguisher (no larger than 10 lbs.).

Owner/Buyer

Seller/ Agent