



# Transfer of Title Application

Department of Construction and Zoning

Town of Harrison

Telephone: 973-268-2446 318 Harrison Ave, Harrison New Jersey 07029

Fax: 973-268-2423

www.townofharrison.com

Block: \_\_\_\_\_ Lot: \_\_\_\_\_ Date Received: \_\_\_\_\_

Owner's Name: \_\_\_\_\_ Purchaser's Name \_\_\_\_\_

Property Address: \_\_\_\_\_ Purchaser's Address \_\_\_\_\_

Town/State/Zip: \_\_\_\_\_ Town/State/Zip: \_\_\_\_\_

Telephone No. \_\_\_\_\_ Telephone No. \_\_\_\_\_

Number of dwelling units: \_\_\_\_\_ @ \_\_\_\_\_ Total fee: \_\_\_\_\_

Approximate Closing Date: \_\_\_\_\_ Check #: \_\_\_\_\_

Description of Use: \_\_\_\_\_ Cash: \_\_\_\_\_

Signature: \_\_\_\_\_

(Owner/Agent)

The Certificate shall indicate that as a result of a general inspection of the visible parts of the structure, no violations have been determined to have occurred and no unsafe conditions have been found, and that the existing use of the structure heretofore lawfully existed.

## Office Use Only:

Use Group: \_\_\_\_\_ Open Permits: \_\_\_\_\_

No. of Dwelling Units: \_\_\_\_\_ Zone: \_\_\_\_\_ Monetary Penalties: \_\_\_\_\_

Legal Use: \_\_\_\_\_ Correspondence: \_\_\_\_\_

Fire Dept: (Smoke Detector) : \_\_\_\_\_ State Housing (Violations): \_\_\_\_\_ State Housing Reg #: \_\_\_\_\_

Lead Certification Compliance per NJAC 5:28 A: \_\_\_\_\_

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

Zoning Official or Designee