## **Borough of Rockaway**

1 East Main Street Rockaway, NJ 07866 973-627-2000 x230



## **CONSTRUCTION PERMIT INSPECTION REQUEST**

Per the State of New Jersey, N.J.A.C. 5:23-2.18(c), ALL inspection requests must now be made in writing. Inspections shall be performed within three business days, or other such time within 30 days, as agreed upon by the enforcing agency and the owner, agent, or other responsible person in charge of work, of the time for which it is requested. The enforcing agency shall notify the owner, agent, or other responsible person in charge of work when the inspection will be performed within 24 hours of official receipt of the notice.

- 1. All the required information below MUST be provided including the permit number, worksite address, the requestor's name and phone number.
- 2. Select all applicable Subcodes and indicate the type of inspection you are requesting.
- 3. Indicate the inspection date you are requesting.
- 4. **NOTE:** The inspection request must be confirmed by the Department staff before it is added to the schedule. Due to scheduling, it may not be the date requested.

## PLEASE PRINT CLEARLY

| Permit #            |                | Toda       | Today's date: |            |  |
|---------------------|----------------|------------|---------------|------------|--|
| Worksite Address: _ |                |            |               |            |  |
| Requestor's Name:   |                |            |               |            |  |
| Phone #:            |                |            |               |            |  |
| SUBCODE(S): Buildi  | ng Electric    | al Fire    | Plumbing      | Mechanical |  |
| Inspection Type:    |                |            |               |            |  |
|                     |                |            |               |            |  |
| ******              | ******         | *****      | ******        | ******     |  |
|                     |                | OFFICE USE | =             |            |  |
| DATE SCHEDULED A    | ND CONFIRMED B | Y:         |               |            |  |
| BLOCK∙              | LOT:           | ΟΠΔΙ:      |               |            |  |