



**City of Burlington**  
525 High Street  
Burlington, NJ 08016  
(609) 386-0200 x142  
[inspections@burlingtonnj.us](mailto:inspections@burlingtonnj.us)

## **TENANT CHANGE INSPECTION APPLICATION**

**INSPECTIONS MUST BE SCHEDULED AT LEAST 10 BUSINESS DAYS PRIOR TO THE MOVE IN DATE**

**Date of Application:** \_\_\_\_\_ **Approximate or Actual Move in Date:** \_\_\_\_\_

*Application is hereby made for inspection, approval and issuance of a Certificate of Inspection for the dwelling.*

**Property Owner:** \_\_\_\_\_

**Address To Be Inspected:** \_\_\_\_\_ **Lock Box #** \_\_\_\_\_

**Unit:** \_\_\_\_\_ **Number of Bedrooms:** \_\_\_\_\_ **Property Type:** \_\_\_\_\_

**Primary Tenant:** \_\_\_\_\_ **Primary Tenant Phone:** \_\_\_\_\_

**Primary Tenant E-mail:** \_\_\_\_\_

**LIST ALL OCCUPANTS, AGE, AND "THEIR" RELATIONSHIP TO THE HEAD OF HOUSEHOLD**  
ie: Mother, Father, Daughter, Son, etc.

NAME	AGE	RELATIONSHIP
		Head of Household

**Pets on Location? Yes/No** **Dog/Cat/Etc.:** \_\_\_\_\_ **Breed:** \_\_\_\_\_ **Weight:** \_\_\_\_\_

**Signature of Owner/Manager:** \_\_\_\_\_

**Owner/Manager E-mail:** \_\_\_\_\_

**Owner/Manager Phone:** \_\_\_\_\_

**\$100.00 Inspection Fee will be paid by: Check/Credit Card**

**IF PAYING BY CREDIT CARD, CLICK HERE. PLEASE USE THE PROPERTY ADDRESS ON THE REFERENCE NUMBER LINE WHEN PAYING ONLINE.**  
**THIS FORM DOES NOT AUTOMATICALLY GET SENT TO US, PLEASE MAIL IT IN OR EMAIL IT TO [INSPECTIONS@BURLINGTONNJ.US](mailto:INSPECTIONS@BURLINGTONNJ.US)**