# LOWER OXFORD TOWNSHIP

## Certificate of Compliance
## For Resale

Fee: $50.00 Date Paid: _____ Check #: _____

Property located at: _____
Street address & Post Office

Tax ID number: _____
Parcel #

Current Owner: _____

Buyer: _____

Owner occupied: Yes _____ No _____

Person to Contact for Inspection: _____

Phone Number: _____ Cell Phone: _____

Settlement Date: _____ Realtor: _____

***(This section to be completed by Inspector)***

**Smoke detectors working at these locations**: Basement
1st Floor
2nd Floor
3rd Floor

**Reflective street numbers**: **YES** **NO**

**Property** **PASSED** **FAILED**

Inspected by: _____
Signature

Comments: _____

_____

Re-inspected: YES NO

Additional Fee: $25 Date: _____ Paid by: _____

Re-inspected by: _____
Signature