



APPLICATION FORM FOR CCO INSPECTION

INSPECTOR M. CHRISTOPHER SHAY
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DATE _____

PROPERTY LOCATION

NAME OF PROPERTY
OWNER _____

NAME AND TELEPHONE NUMBER OF PERSON RESPONSIBLE FOR THIS INSPECTION

DOES THIS LOCATION HAVE A MONITORED FIRE ALARM SYSTEM? Please circle Y / N
* Example ADT, Brinks, Sломens.

IF THIS LOCATION HAS AN ALARM SYSTEM THE OWNER MUST BE PRESENT FOR THE
INSPECTION TO OPERATE THE ALARM KEY PAD. **NO EXCEPTIONS**

- **THIS INSPECTION MUST BE PAID FOR PRIOR TO THE INSPECTOR
CONDUCTING THE CCO INSPECTION**

➤ **INSPECTION FEE OF \$100.00**

- **Emergency Inspection within 72 hrs. \$150.00**
- **Emergency Inspection within 24 hrs. \$200.00**

METHOD OF PAYMENT CHECK# _____ / CASH (PLEASE CIRCLE IF CASH)

**THIS FORM IS TO ENSURE THAT THE TOWNSHIP OF MORRIS HAS ALL THE
PROPER INFORMATION TO EXECUTE THE CCO INSPECTION.**