



# TOWNSHIP OF WASHINGTON / GLOUCESTER COUNTY

## AFFIDAVIT

I/We \_\_\_\_\_ do hereby agree to accept this property located at \_\_\_\_\_ A.K.A. Block \_\_\_\_\_ Lot (s) \_\_\_\_\_ in "as is" condition. I understand that I am responsible for taking out proper permits and making all necessary repairs to bring this property up to township codes. I have received a list of repairs required for a Certificate of Occupancy. I understand that no occupancy can take place until Life Safety repairs are made and a re-inspection is completed unless otherwise stated in this letter.

Temporary occupancy can take place for a period not to exceed thirty (30) days, at which time all work must be completed and a re-inspection will take place.

\_\_\_\_\_  
Inspector

\_\_\_\_\_  
Date

\_\_\_\_\_  
Construction Official

\_\_\_\_\_  
Date

Failure to comply will result in penalties set forth in section 1-4 of the Housing Code of the Township of Washington.

### NOTARY

\_\_\_\_\_  
Buyer

\_\_\_\_\_  
Date

\_\_\_\_\_  
Buyer

\_\_\_\_\_  
Date