



TOWN OF DOVER

CONSTRUCTION OFFICE

100 Princeton Avenue

Dover, NJ 07801

www.dover.nj.us

INSPECTION REQUEST FORM

SUBMISSION DATE: _____ TIME: _____

PROJECT ADDRESS: _____

PERMIT NUMBER: _____

CONTACT PERSON NAME: _____

CONTACT PERSON EMAIL: _____

INSPECTION REQUEST DATE: _____

COMMENTS: _____

Requested Inspection Type (check the box to request a subcode and inspection type):

Subcode:

Building

Electrical

Fire

Plumbing

Mechanical

Type of Inspection:

Rough Footing

Foundation

Frame

Above Ceiling

Slab

Backfill

Insulation

Pressure Test

Final

Other: _____

Type of Inspection:

If multiple inspections are requested, please list them below:

Subcode:

Type of Inspection:

All new Inspection Request Forms must be filled in under the most current Construction Codes adopted by the New Jersey Department of Community Affairs (NJ DCA). For more information, view [NJ DCA Code and Regulations](#). All inspection requests must be in writing 5:23-2.18(c) at least 24 hours prior to the requested inspection date.

To submit request form:

- Deliver in person: 100 Princeton Avenue (8:30 am – 4:00 pm)
- Send via email to:

Ashley Traverso- atraverso@Dover.nj.us or Carolyn O'Connor – coconnor@Dover.nj.us

(Form must be completed and emailed as an attachment)