



West Windsor Township

271 Clarksville Road, West Windsor, NJ 08550 * Tel. (609) 936-8400 * Fax (609) 799-2136

Lead-safe Inspection Request Form

This form is used to request a Township-facilitated inspection for the lead-safe rental program. The information provided on this form will be provided to the professional contracted by the Township to provide this service in West Windsor Township. Property owners are responsible for all fees associated with the services.

- Initial Inspection Request Due: April 1, 2024 or 20 days prior to tenant turnover, whichever is earlier.
- Periodic Inspection Request Due: 20 days prior to lead-safe certificate expiration or tenant turnover, whichever is earlier.

Property Information

Rental Property Address: _____

Unit # (if applicable): _____ Block: _____ Lot: _____

Date Constructed: _____ Number of Bedrooms: _____

Do you have more than one (1) rental unit to be inspected? _____ # of Units _____

Duplicate forms are not required if you are requesting multiple inspections at this time.

Owner / Landlord Name: _____

Mailing Address: _____

Phone Number: _____

Email Address: _____

Date Received: _____

Submit completed forms to health@westwindsortwp.com or mail to:

**West Windsor Township
Lead-Safe Rental Program
PO Box 38
West Windsor, NJ 08505**