

TYPE 1 PERMIT: TEMPORARY CHANGE OF USE/ MULTIPURPOSE ROOM

FEE: \$54.00

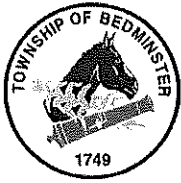
TWO WEEKS NOTICE IS REQUIRED PRIOR TO ANY PERMIT INSPECTION.

APPLICATION MUST BE FILLED OUT AND ALSO INCLUDE:

A floor plan to be occupied, which identifies the location of the following:

- Exits
- Primary evacuation route
- Secondary evacuation route
- Accessible egress routes, if available
- Manual pull stations, if any
- Fire extinguishers, if any
- Tables and Chairs layout

Required to follow all applicable code requirements in the New Jersey Uniform Fire Code as well as the International Fire Code 2015, New Jersey Edition



Bedminster Township Fire Prevention Department
 One Miller Lane, Bedminster, NJ 07921
 (908) 212-7000 ext. 427

**FIRE
 PERMIT APPLICATION**
 AS PER ORDINANCE 2017-02

TYPE: 1 **2** **3** **4**

ORGANIZATION TYPE: FOR PROFIT NON-PROFIT

LOCATION INFORMATION	
Name:	Address/City/State/Zip
Municipality:	County:

APPLICANT INFORMATION		
Name:		Address/City/State/Zip
Phone:	Cell Phone:	Email:
PROPERTY OWNER INFORMATION (if different from applicant information)		
Name:		Address/City/State/Zip
Phone:	Cell Phone:	Email:

TYPE 1: \$54.00/EA TYPE 2: \$214.00/EA TYPE 3: \$427.00/EA TYPE 4: \$641.00/EA

Permit requested for following date(s): _____
 Permit requested on an annual basis – Expiration Date: _____

NOTE: Attach additional signed sheet if space is insufficient

The above named applicant hereby requests permission to conduct the following activity at the above location:

I hereby acknowledge that the information given is correct and agree to comply with the applicable requirements of the fire code as well as any specific conditions imposed and if not, this permit may be revoked and will be subject to penalties as provided by law.

Applicant's Signature _____ Title _____ Date _____

MAKE CHECK PAYABLE TO "BEDMINSTER TOWNSHIP"

FOR OFFICIAL USE ONLY – LEA 1807-001			
FIRE PERMIT: []	Conditions Imposed []	Denied []	Approved []
			Approved pending payment of Fee \$ _____
Comment: _____			PERMIT # _____
FIRE OFFICIAL: _____			DATE: _____