

NEPTUNE BUREAU FIRE PREVENTION

PO BOX 457, NEPTUNE, NJ 07754-0457

FIRE SAFETY REGISTRATION APPLICATION

PURSUANT TO ORDINANCE #1262 & 1555, TOWNSHIP OF NEPTUNE AND NJAC 5:70-1 ET SEQ.
EVERY PERSON OR BUSINESS THAT IS SENT A REGISTRATION APPLICATION MUST RETURN SAME
WITHIN FIFTEEN (15) DAYS. *SUCH APPLICATION MUST BE COMPLETED IN ITS ENTIRETY.*
FAILURE TO FILE SAID APPLICATION WILL RESULT IN A MONETARY PENALTY.

BUSINESS INFORMATION

BUSINESS NAME: _____ FEE: _____

CHECK ONE: NAME CHANGE ____ NEW BUSINESS ____ ANNUAL RENEWAL X

BUSINESS ADDRESS: _____ PHONE: _____

BUSINESS OPERATOR'S NAME: _____ PHONE: _____

OPERATOR'S HOME ADDRESS: _____

CITY, STATE, ZIP: _____

DESCRIPTION OF BUSINESS: _____

SQUARE FOOTAGE USED BY BUSINESS: _____

FIRE INSURANCE CARRIER: _____

POLICY AMOUNT: _____

BUILDING OWNER INFORMATION

BUILDING OWNER: _____

OWNER ADDRESS: _____

CITY, STATE, ZIP: _____

I CERTIFY THAT THE ABOVE INFORMATION IS CORRECT AND TRUE TO THE BEST
OF MY KNOWLEDGE:

NAME (PRINT): _____ DATE: _____

SIGNATURE: _____

EMERGENCY INFORMATION

NAME: _____ PHONE: _____

ADDRESS: _____

THE ABOVE INFORMATION IS NECESSARY AND WILL BE USED IN THE CASE
OF AN EMERGENCY BY THE FIRE OR POLICE DEPARTMENT TO CONTACT
THE BUILDING OWNER/OPERATOR IMMEDIATELY.

FOR OFFICE USE ONLY

FP# _____ DATE: _____ DUE: _____