

NEPTUNE BUREAU OF FIRE PREVENTION

P.O. 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

Invoice # _____

BLOCK: _____ LOT: _____

BUSINESS NAME: _____ FEE: _____

CHECK ONE: NAME CHANGE _____ NEW BUSINESS _____ ANNUAL RENEWAL

BUSINESS ADDRESS: _____ PHONE: _____

MAILING ADDRESS: _____

BUSINESS OPERATOR'S NAME: _____ PHONE: _____

OPERATOR'S HOME ADDRESS: _____

CITY, STATE, ZIP: _____

EMAIL ADDRESS: _____

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: _____