

VILLAGE OF RIDGEFIELD PARK BUREAU OF FIRE PREVENTION 50 MAIN STREET RIDGEFIELD PARK, NJ 07660 CHIEF PETER A. DANZO 201-440-2570 FAX 201-440-1360

Dear New Business Owner

Welcome to the Village of Ridgefield Park!

Enclosed you will find two forms: Fire Safety Registration and a Flammable or Combustible Liquid or Hazardous Material Application. Please review and complete both forms and return them to the Village Bureau of Fire Prevention, within five (5) business days.

These forms shall be completed in accordance with the New Jersey Uniform Fire Safety Act (N.J.S.A. 52:27D-192 et seq.) Failure to complete these forms and return them to the Bureau may result in fines up to \$500.00

Pursuant to the New Jersey Administrative Code, N.J.A.C. 5:70-2.1(b), the Village Bureau of Fire Prevention shall inspect all premises, with the exception of owner occupied one and two family homes, as often as may be necessary for the purpose of ascertaining and causing to be corrected any condition liable to cause fire, contribute to the spread of fire, interfere with fire operations, endanger the life of occupants, or any violations of the provisions or intent of this code or any ordinance affecting fire safety.

A registration and inspection fee is required along with the applications and the Bureau Secretary will advise you of the amount.

Thank you for your anticipated cooperation and assistance. The Bureau Inspectors and I look forward to working with you in the interest of Fire Safety. If you have any questions, please feel free to call on me.

Very truly yours,

Peter A. Danzo Fire Marshal

HDH/fao



BUSINESS NAME

VILLAGE OF RIDGEFIELD PARK BUREAU OF FIRE PREVENTION 50 MAIN STREET RIDGEFIELD PARK, NJ 07660 PHONE: 201-440-2570

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NON-LIFE HAZARD USE BUSINESS APPLICATION

IN ACCORDANCE WITH THE NEW JERSEY STATE UNIFORM FIRE SAFETY ACT, ALL BUSINESSES SHALL REGISTER WITH THE LOCAL BUREAU OF FIRE PREVENTION ANNUALLY. FAILURE TO DO SO MAY RESULT IN A PENALTY.

COMPLETE ALL INFORMATION

BUSINESS ADDRESS							
E-MAIL							
BLOCKLOT							
MAILING ADDRESS(If Different From Above)	H-1						
BUSINESS TELEPHONE	HOURS OF OPERATION	# OF EMPLOYEES					
TYPE OF BUSINESS	SQUARE FOOTAGE (ALL A	REAS)					
LOCATION OF THE FOLLOWING: (B)	E SPECIFIC)						
GAS & ELECTRIC METER	WATER METER						
ALARM PANEL (IF EXISTING)							
EMERGENCY INFORMATION (MUST BE COMPLETED)							
BUSINESS OWNER							
HOME ADDRESS							
EMAIL							
HOME TELEPHONE							
EMERGENCY CONTACT #1	РНОМ	IE					
EMERGENCY CONTACT #2	PHON	VE					
REG# DATE REG	OFFICE USE ONLY CEIVED COMPUTER EN	TRY					



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TYPE 1 PERMIT APPLICATION USE, SALE, OR STORAGE OF FLAMMABLE OR COMBUSTIBLE LIQUIDS OR ANY TYPE OF HAZARDOUS MATERIAL OR CHEMICAL

This form shall be completed and returned to the Bureau of Fire Prevention to obtain a permit to use, sell or store flammable or combustible liquids, or any type of hazardous material, gases or chemical regardless of the amount or quantity. If this form does not apply to your business, just sign the form, where indicated below, and return it to the Bureau of Fire Prevention so we may update our files for your address.

The New Jersey Uniform Fire Code, N.J.A.C. 5:70-2.7(a) states: "It shall be unlawful to engage in any business activity involving the handling, storage or use of hazardous substances, materials or devices; or to maintain, store or handle materials; to conduct processes which produce conditions hazardous to life or property; to install equipment used in connection with such activities; or to establish a place of assembly without first obtaining a permit from the Fire Official/ Fire Marshal."

Examples of materials: Flammable, Combustible, Oxidizers, Poisons, Pesticides, Infectious substances, Radioactive, Corrosive, Explosive or Dangerous substances capable of creating harm to people, the environment, or property.

Please circle all that pertain to your business:

1. Manufacturing	Yes	No	3. Handling	Yes	No	
2. Storing	Yes	No	4. Selling	Yes	No	
Please complete the follo	wing informatio	on and attach a li	st of all substances and their q	uanties.		
NAME OF BUSINESS			ADDRESS OF BUSINESS			
BUSINESS TELEPHON	E		DATE OF APPLICATION	ON		
APPLICANTS SIGNATURE			FORM DOES NOT APPLY - SIGNATURE			
		OFFICE US				
PERMIT #DATE ISSUED_			COMPUTER ENTRY			