

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

APPLICATION FOR FIRE PERMIT

Please make check payable to THE VILLAGE OF RIDGEFIELD PARK

LOCATION INFORMATION

	LUCATION INFURMA	HON
Registration #:		
Name:	Street A	Address:
Municipality:	State/Zi	p Code:
Area Code and Phone Number	er: Email:	
APPLICANT INFORMATION		
Applicant's Name:	Street A	Address:
Municipality:	State/Z	ip Code:
Area Code/Phone Number:	Email:	
If Contractor, License #:		
() Permit requested for following date(s):		
State quantities and method for each category or material to be stored or used:		
I hereby acknowledge that the information given is correct, and agree to comply with the applicable requirements of the New Jersey State Uniform Fire Code as well as any specific conditions imposed, and, if not, this permit may be revoked and I will be subject to penalties as provided by law.		
Signature	Title	Date
nspected on: Inspector:		
OFFICE USE ONLY		
PERMIT TYPEDATE RECEIVEDCOMPUTER ENTRY		