

PISCATAWAY TOWNSHIP
FIRE PREVENTION BUREAU
555 SIDNEY ROAD
PISCATAWAY, NJ 08854
(732)562-2315

REGISTRATION FORM:

PURSUANT TO PISCATAWAY TOWNSHIP FIRE PREVENTION CODE, CHAPTER 19.(ADDITIONAL REQUIRED INSPECTION AND FEES) OF THE TOWNSHIP OF PISCATAWAY. IN ADDITION TO LIFE HAZARD USES IT IS REQUIRED THAT ALL BUILDINGS, STRUCTURES, USES AND PREMISS SHALL BE REGISTERED AND AN ANNUAL FEE BE PAID TO THE PISCATAWAY FIRE PREVENTION BUREAU.

BUSINESS NAME: _____

ADDRESS: _____

TELEPHONE: _____

EVERY PERSON OR BUSINESS THAT RECEIVED A REGISTRATION FORM APPLICATION MUST RESPOND. THE APPLICATION MUST BE RETURNED WITHIN 30 DAYS WITH ALL APPLICABLE ITEMS COMPLETED, FAILURE TO DO THIS WILL CONSTITUTE A VIOLATION OF TOWNSHIP ORDINANCE REGULATIONS AND MAY SUBJECT YOU TO A PENALTY UP TO A \$500.00 MAXIMUM FOR EACH OCCURRENCE.

DESCRIBE BRIEFLY THE USES OR THE BUSINESS AT THE ABOVE LOCATION:

CHECK OFF ONE OF THE FOLLOWING

BUSINESS:

MERCANTILE:

STORAGE:

SQUARE FEET:

ANNUAL FEE:

L-1	UNDER 500 SQUARE FEET	\$30.00
L-2	500 TO 2,500 SQUARE FEET	\$45.00
L-3	2,501 TO 5,000 SQUARE FEET	\$55.00
L-4	5,001 TO 7,500 SQUARE FEET	\$65.00
L-5	7,501 TO 10,000 SQUARE FEET	\$90.00
L-6	10,001 TO 40,000 SQUARE FEET	\$140.00
L-7	40,001 TO 80,000 SQUARE FEET	\$190.00
L-8	80,001 TO 120,000 SQUARE FEET	\$240.00
L-9	121,000 AND UP	\$290.00

FLOOR AREA OF BUSINESS _____ SQUARE FEET

BUSINESS OWNER:

OWNER NAME: _____

HOME ADDRESS: _____

CITY/STATE: _____ ZIP: _____

TENANT? _____ OWNER? _____

PLEASE COMPLETE ALL THE INFORMATION AND RETURN THE COMPLETED
REGISTRATION FORM AND THE REQUIRED FEE WITHIN (30) DAYS AND MAKE
CHECK PAYABLE TO:

PISCATAWAY TOWNSHIP
FIRE PREVENTION BUREAU
555 SIDNEY ROAD
PISCATAWAY, NJ 08854
(732)562-2315

SIGNATURE OF OWNER/ TENANT

_____ DATE: _____