Colts Neck Fire Prevention Bureau
3 Veterans Way Colts Neck NJ, 07722

PHIL ENGEL, FIRE OFFICIAL
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Office (732) 344-0340 Fax (732) 462-8460

APPLICATION FOR FIRE SAFETY PERMIT

The N.J. State Fire Code N.J.A.C. 5:70-2.7(a) states:

"Permits shall be required and obtained from the local enforcing agency for the activities specified in this section, except where they are an integral part of a process or activity by reason of which a use is required to be registered and regulated as a life hazard use. Permits shall at all times be kept in the premises designated therein and shall at all times be subject to inspection by the Fire Official.

NOTE: Each individual act requires a separate permit. There are five (5) types of permits. Consult your local Fire Official for the types of permit(s) required and the fee schedule. **The activity is not to take place unless the Fire Official has issued a permit.** Conducting the activity before an inspection and receiving an approved permit will result in penalties and fines. Allow 2-3 weeks after filing an application for processing and scheduling of the inspection.

Please PRINT all information clearly

Applicant Name: _____ Address: _____

Applicant Phone #: _____ Applicant Email: _____

Event/Activity Location: _____

Date(s) of the Event/Activity: _____Time of Event: _____

Event On-site contact: _____On-Site Phone #: _____

The above-named applicant hereby requests permission to conduct the following activity at the indicated location (please describe):

_____

I hereby acknowledge that I have read this application, that the information given is correct and that I am the owner or duly authorized person to act in the owner 's behalf and as such hereby agree to comply with the applicable requirements of the Fire Code as well as any specific conditions imposed by the Fire Official.

Applicant Signature: _____ Date: _____ Title: _____

MAKE CHECKS PAYABLE TO: COLTS NECK TWP. FIRE PREVENTION

********** FOR OFFICE USE ONLY BELOW**********

Permit Type: _____Fee: _____Check #:_____Date Received: _____

Inspection Date: _____ ( ) Approved ( ) Denied ( ) Approved with conditions

_____
Fire Official Signature