



# FIRE PREVENTION BUREAU

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PURSUANT TO EATONTOWN BOROUGH LOCAL ORDINANCE, 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.

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## PLEASE WRITE LEGIBLY!

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### BUSINESS INFORMATION

BUSINESS NAME: \_\_\_\_\_

BUSINESS ADDRESS: \_\_\_\_\_

BUSINESS EMAIL: \_\_\_\_\_

BUSINESS PHONE NUMBER: \_\_\_\_\_ SQUARE FOOTAGE: \_\_\_\_\_

EMERGENCY CONTACT NAME: \_\_\_\_\_ NUMBER: \_\_\_\_\_

EMERGENCY CONTACT NAME: \_\_\_\_\_ NUMBER: \_\_\_\_\_

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### BUSINESS OWNER INFORMATION

BUSINESS OWNER'S NAME: \_\_\_\_\_

BUSINESS OWNER'S PHONE NUMBER: \_\_\_\_\_

BUSINESS OWNER'S EMAIL ADDRESS: \_\_\_\_\_

BUSINESS OWNER'S MAILING ADDRESS: \_\_\_\_\_

FIRE ALARM COMPANY NAME: (if applicable) \_\_\_\_\_ PHONE NUMBER: \_\_\_\_\_

MANAGER NAME/PHONE NUMBER: \_\_\_\_\_

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### BUILDING OWNER INFORMATION

BUILDING OWNER'S NAME: \_\_\_\_\_

BUILDING OWNER'S MAILING ADDRESS: \_\_\_\_\_

BUILDING OWNER'S PHONE NUMBER: \_\_\_\_\_

BUILDING OWNER EMAIL ADDRESS: \_\_\_\_\_

**I CERTIFY THAT THE ABOVE INFORMATION IS CORRECT AND TRUE:**

NAME (PRINT): \_\_\_\_\_

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

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**BUSINESS OWNER MUST SUPPLY A KEY FOR THE KNOX BOX. IF KEY IS CHANGED, BUSINESS OWNER MUST NOTIFY EATONTOWN FIRE PREVENTION.**