

# Eatontown Fire Prevention

47 Broad Street  
Eatontown, NJ 07724  
fp@eatontownnj.com  
www.eatontownnj.com

Telephone: (732) 389-7620 FAX: (732) 389-7670



## FIRE SAFETY REGISTRATION FORM

Owners of possible Life Hazard Use businesses must complete and file this form in accordance with the Uniform Fire Safety Act (N.J.A.C. 52:27D-192 et seq.). Failure to do so may result in a penalty of up to \$1,000.00

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-----**Part A – Business Registration Information**-----

**1. Business Ownership (mark the correct box):**

- (0)  Corporation      (1)  Private / Individual      (2)  Partnership      (3)  Condominium  
(4)  Cooperative      (5)  Government Agency      (6)  LLC Corporation

**2. Business/Corporation Mailing Address:**

If Private / Individual: Name: \_\_\_\_\_  
Last First Middle Initial

If Other: \_\_\_\_\_  
Give FULL Legal Name of Ownership, Including Corporation, Incorporated, Partnership, T/A etc.

Address: \_\_\_\_\_  
PO Box Number or Street Number and Name

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_ - \_\_\_\_\_

\_\_\_\_\_ Federal Employer (Tax ID) Number      \_\_\_\_\_ Social Security Number (For Private / Individual Only)

In accordance with N.J.S.A. 52:27D -201 and N.J.A.C. 5:3-1.2, voluntary provision of your social security number will ensure the efficiency of its program's notification system.

Telephone: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

*Continued on Reverse Side*

### FOR FIRE OFFICIAL / DFS USE ONLY

USE CODE (S): \_\_\_\_\_

LEA Number: \_\_\_\_\_

Assigned Owner Number: \_\_\_\_\_  New Application

Alternate Owner Number: \_\_\_\_\_  Transfer

