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Anthony Greci, Fire Official | Kenneth Schmertz, Fire Inspector

APPLICATION FOR CERTIFICATE OF REGISTRATION

(please print or type all information)

Pursuant to the Uniform Fire Safety Act and the regulations adopted thereunder, all buildings, structures and uses within the Township of South Orange Village, except for owner-occupied one and two family dwelling units, shall be periodically inspected by the Fire Prevention Bureau for compliance with the New Jersey Uniform Fire Code.

*****THIS AREA OFFICE USE ONLY*****

Local I.D.# _____ State I.D. # _____ Date Registered: _____

Business Information

Business Name: _____

Street Address: _____

Do you own or lease: Own Lease (circle one) Square Feet: _____ Fed I.D. #: _____

Business Type: Individual _____ Partnership _____ Corporation _____ LLC _____ Other _____

Description of use/ occupancy of business/ building: _____

E-mail Address: _____

Business Owner

Business Owner Name: _____ Phone #: _____

Business Owner's Home Address: _____

Business Owner E-mail Address: _____ Business Owner Fed. I.D. #: _____

Emergency Contacts

Contact Person #1: _____ Phone: _____

Contact Person #2: _____ Phone: _____

Contact Person #3: _____ Phone: _____

Building Owner

Building Owner Name: _____ Phone #: _____

Building Owner's Home Address: _____

Building Owner E-mail Address: _____ Building Owner Fed. I.D. #: _____

BUILDING INFORMATION:

Type of Construction: _____ Roof Construction: _____

Floor Construction: _____ Truss Construction (floor/ roof/ both): _____

Fire Sprinkler System: Yes No (circle one) OS+Y(shutoff) Location: _____

If yes, what does it cover(circle one): Full Building Partial(where is covered): _____

Alarm/ Suppression System Description: _____

Monitoring Company Name: _____ Phone: _____

Closest Fire Hydrant: _____ Knox Box Location: _____

Flammable / Combustible Liquids(if so, where): _____

Other Hazards: _____

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

Print Name(Business Representative)

Signature

Title

Date

*****THIS AREA OFFICE USE ONLY*****

Checked by: _____

Date: _____

Remarks: _____