



# BUREAU OF FIRE SAFETY

EAST BRUNSWICK FIRE DISTRICTS #1 & #3  
680 OLD BRIDGE TURNPIKE  
EAST BRUNSWICK, N.J. 08816  
TEL: (732) 651-8806  
FAX: (732) 257-0960

## APPLICATION FOR PERMIT

The Uniform Fire Code 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 marshal.” [N.J.A.C. 5:70-2.7(a)]

Location where activity will occur: \_\_\_\_\_

Dates & Times of event:

Date: \_\_\_\_\_ Setup time: \_\_\_\_\_ Start time of event: \_\_\_\_\_  
End time of event: \_\_\_\_\_  
Date: \_\_\_\_\_ Setup time: \_\_\_\_\_ Start time of event: \_\_\_\_\_  
End time of event: \_\_\_\_\_

Organization: \_\_\_\_\_

Address: \_\_\_\_\_ Phone: \_\_\_\_\_

Applicant's name: \_\_\_\_\_ Cell phone: \_\_\_\_\_

Email: \_\_\_\_\_

The above named applicant hereby requests permission to conduct the following activity at the above indicated location:

\_\_\_\_\_  
\_\_\_\_\_

I hereby acknowledge that I have read this application, that the information given is correct, and that I am the owner, or duly authorized 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 marshal.

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Fire Marshal's Signature

\_\_\_\_\_  
Date of Application

\_\_\_\_\_  
Fee Amount

\_\_\_\_\_  
Permit Type

# SMOKE DETECTORS SAVE LIVES!