

Do not write "SAME" in any of the boxes even if information is duplicated



## Township of Clinton & Lebanon Borough Bureau of Fire Safety

**Select One**

Registration of Non-Life Hazard

Updated Information

### Section 1: Name of Business/Organization Location Information

Municipal Code 1006	<b>Block</b>	<b>Lot</b>	<b>Qualifier:</b>	<b>Registration #: (Office Use)</b>
<b>Name:</b>				<b>Address:</b>
<b>City:</b>			<b>Suite or Room #:</b>	<b>County:</b> <i>Hunterdon</i>
<b>State:</b>		<b>Zip Code:</b>	<b>Business Phone #:</b>	<b>Local ID:</b> (Office Use)

#### Business/Organization Ownership Type (check one that applies)

- |                                      |                                     |                                      |                                      |
|--------------------------------------|-------------------------------------|--------------------------------------|--------------------------------------|
| <input type="checkbox"/> Corporation | <input type="checkbox"/> Individual | <input type="checkbox"/> Partnership | <input type="checkbox"/> Condominium |
| <input type="checkbox"/> Cooperative | <input type="checkbox"/> Government | <input type="checkbox"/> LLC         | <input type="checkbox"/> Other:      |

### Section 2: Owner of Business (Not Information of the location, Home Mailing Address, and contact info of Owner)

<b>Name:</b>		<b>Address:</b>	
<b>City:</b>		<b>County:</b>	<b>State:</b>
<b>Zip Code:</b>	<b>Cell #:</b>	<b>Email:</b>	

### Section 3: Applicant & Mailing Address (Indicate the Mailing Address For this Organization)

<b>Name:</b>		<b>Address:</b>	
<b>City:</b>		<b>County:</b>	<b>State:</b>
<b>Zip Code:</b>	<b>Cell #:</b>	<b>Email:</b>	

### Section 4: Building Owner/Landlord

<b>Name:</b>		<b>Address:</b>	
<b>City:</b>		<b>County:</b>	<b>State:</b>
<b>Zip Code:</b>	<b>Cell #:</b>	<b>Email:</b>	

**Section 5: Total Square Footage of Business/Organization/Unit Space:** \_\_\_\_\_ Square Feet

**Section 6: Describe Business Use:** \_\_\_\_\_  
\_\_\_\_\_

#### Section 7: Does your location have any of the following:

- |   |                                    |                                     |   |
|---|------------------------------------|-------------------------------------|---|
| <input type="checkbox"/> Cooking Hood   | <input type="checkbox"/> Elevator  | <input type="checkbox"/> Fire Alarm | <input type="checkbox"/> Fire Sprinkler |
| <input type="checkbox"/> Fire Standpipe | <input type="checkbox"/> Generator | <input type="checkbox"/> Hot Work   | <input type="checkbox"/> Knox Box       |

#### Section 8: Emergency Contact

Name: \_\_\_\_\_ Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Name: \_\_\_\_\_ Phone: \_\_\_\_\_ Email: \_\_\_\_\_

THIS FORM SHALL BE FILLED OUT IN ITS ENTIRETY

READ AND REVIEW OTHER SIDE

# Township of Clinton & Lebanon Borough Bureau of Fire Safety

The Township of Clinton Bureau of Fire Safety will conduct fire safety inspections in the Township of Clinton and Lebanon Borough of your building or leased space. All buildings in the Township of Clinton and shared service areas in Lebanon Borough can be subject to a fire inspection annually. Each tenant or separate business owner/designee shall fill out a registration form completely and correctly. As per Municipal Ordinance § 133-8, Failure to comply will result in assessment of a Penalty of \$250.00.

The State Uniform Fire Safety Act-52:27D-203(a) enables a municipality to establish registration fees for Non-Life Hazard Uses. All fees are based on the square footage of the owned or leased space. Businesses currently not required to register with the NJ Division of Fire Safety (State of NJ) are required to register with the Township of Clinton Bureau of Fire Safety. They shall pay an annual registration fee to the Bureau of Fire Safety. The Bureau of Fire Safety may also conduct a periodic inspection to ensure compliance with the NJ Uniform Fire Code.

An invoice may be sent to your business or tenant space upon application submission. It will require the tenant and/or building owner to submit a check payable to the **Clinton Township Bureau of Fire Safety** within 30 days of notification. Tenants are responsible for the payment of registration fees. Failure to pay the registration fee may result in penalties as outlined in the NJ Uniform Fire Code. **(Please only submit payment when you receive an invoice).**

If fire code violations are discovered in any structure, the organization will receive a notice to correct the items discovered. If violations have been existing in the past but have yet to be addressed by previous inspections or went undiscovered, they will still be required to be corrected within the abatement window.

## **The registration form consists of a few sections and requests some information:**

**Section 1: Name of Business/Organization Location Information:** Write the name of the business or the "Does Business As" (DBA) name in this section, followed by additional requested information.

**Section 2: Owner of Business:** Write the business owner's name. This would not be the landlord's information unless the landlord is also the business owner.

**Section 3: Applicant/Mailing Address:** Write the applicant's name who filled out the form. The applicant should typically be a manager or the owner of the business. Include the mailing address for this organization.

**Section 4: Building Owner/Landlord:** Write the name and additional information of the building owner or landlord.

**Section 5: Total Square Footage:** Write the total square footage of your space.

**Section 6: Business Use:** Give details of what your location does, such as - Performs, Produces, and Stores.

**Section 7: Location Details:** Check off all that apply to your location.

**Section 8: Emergency Contacts:** Provide 2 emergency contacts with their Name, Phone, and email address.

## **This form can be sent in by mail, fax, or email.**



Fire Marshal - Christopher Sorrentino  
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