

**FIRE DISTRICT No. 1**  
**BUREAU OF FIRE PREVENTION**  
2201 Bangor Avenue, Lindenwold, NJ 08021  
Phone - 856-346-0935 Fax - 856-346-3638

**FIRE SAFETY REGISTRATION FORM**

*OWNERS OF BUSINESSES MUST COMPLETE AND FILE THIS FORM IN ITS ENTIRETY, in Accordance with the New Jersey Bureau of Fire Prevention Code N.J.A.C. 5:70-2.6. Failure to do so may subject you to a penalty of double the registration fee plus any legal fee that may occur.*

**SEND REGISTRATION FORM AND CHECK/MONEY ORDER PAYABLE TO LINDENWOLD FIRE DISTRICT No. 1.**  
**\*\*FEE SCHEDULE ATTACHED\*\***

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**1. BUSINESS INFORMATION**

Date: \_\_\_\_\_

Business Name: \_\_\_\_\_

Business Address: \_\_\_\_\_

Municipality: LINDENWOLD County: Camden

Business Telephone: ( \_\_\_\_\_ ) Block No.: \_\_\_\_\_ Lot No.: \_\_\_\_\_

Please circle type of ownership:

Corporation      Private/Individual      Partnership      Condominium  
Cooperative      Government Agency      LLC Corporation

***\*Registrations, Certificates of Compliance and preliminary Notice of Violations will be sent to the location above\****

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**2. BUSINESS OWNER INFORMATION**

Owner Name: \_\_\_\_\_  
(Give full legal name of ownership)

Owner Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Owner Telephone: ( \_\_\_\_\_ ) Owner Federal ID: \_\_\_\_\_

**3. BUILDING OWNER INFORMATION**

Name:  
(If individual): \_\_\_\_\_

(If other): \_\_\_\_\_  
Give FULL Legal Name of Ownership, including Corporation, Incorporated, Partnership, T/A, et al

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Telephone: ( \_\_\_\_\_ ) Federal ID: \_\_\_\_\_

**4. PERSON TO RECEIVE: ANNUAL REGISTRATION FEE INVOICE, VIOLATIONS, PENALTIES OR CERTIFIED MAIL**

Name: \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

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

**5. MANAGER/AGENT INFORMATION**

Name: \_\_\_\_\_

Address: \_\_\_\_\_ City/State/Zip: \_\_\_\_\_

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

**6. EMERGENCY CONTACT INFORMATION:**

Name: \_\_\_\_\_ Telephone Number: (\_\_\_\_\_) \_\_\_\_\_

Name: \_\_\_\_\_ Telephone Number: (\_\_\_\_\_) \_\_\_\_\_

**7. OCCUPANCY INFORMATION:**

Description of Use: \_\_\_\_\_

Additional Uses: \_\_\_\_\_

Number of Dwelling Units (if applicable) \_\_\_\_\_

Hours of Operation: \_\_\_\_\_

**8. HAZARDS**

List any flammable liquids stored: \_\_\_\_\_

List any Hazmat chemicals stored: \_\_\_\_\_

List any high voltage areas: \_\_\_\_\_

List any heater rooms/steam boilers: \_\_\_\_\_

**9. UTILITY TYPES - check all that apply**

\_\_\_\_\_ Electric    \_\_\_\_\_ Natural Gas    \_\_\_\_\_ Propane    \_\_\_\_\_ Oil    \_\_\_\_\_ Solar    \_\_\_\_\_ Other\*

\*If other, please explain: \_\_\_\_\_

**10. BUILDING SIZE AND CONSTRUCTION**

Length: \_\_\_\_\_(feet)    Width: \_\_\_\_\_(feet)    Height: \_\_\_\_\_(feet)

Number of stories: \_\_\_\_\_

Basement:    Yes            No    (circle one)

Crawlspace:    Yes            No    (circle one)

Square feet, each floor: \_\_\_\_\_

**11. CONSTRUCTION TYPE:** \_\_\_\_\_

**12. FIRE SUPPRESSION SYSTEMS (Complete all that apply)**

A. Building:

Type: \_\_\_\_\_

Company Name: \_\_\_\_\_

Company Telephone: ( \_\_\_\_\_ ) \_\_\_\_\_

B. Cooking:

Type: \_\_\_\_\_

Company Name: \_\_\_\_\_

Company Telephone: ( \_\_\_\_\_ ) \_\_\_\_\_

C. Other:

Type: \_\_\_\_\_

Company Name: \_\_\_\_\_

Company Telephone: ( \_\_\_\_\_ ) \_\_\_\_\_

**13. PORTABLE FIRE PROTECTION EQUIPMENT**

A. Type \_\_\_\_\_ pounds \_\_\_\_\_ gallons \_\_\_\_\_

**14. Elevator/s Maintenance Contractor name and phone number:**

\_\_\_\_\_

**15. Certification:** I certify that all statements made by me on this registration application are true. I am aware that if any of the foregoing statements made by me are willfully false, I am subject to punishment.

Signature of Owner/Agent Completing this Form: \_\_\_\_\_ Date: \_\_\_\_\_

Printed Name of Owner/Agent Completing this Form: \_\_\_\_\_ Title: \_\_\_\_\_

Address of Owner or Agent Completing this Form: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Telephone Number of Owner/Agent Completing this Form: ( \_\_\_\_\_ ) \_\_\_\_\_

**ORDINANCE #1185**

**113-23: Life Hazard Uses**

The local enforcing agency established by 113-21 of this article shall carry out the periodic inspections of life-hazard uses required by the Uniform Fire Code on behalf of the Commissioner of Community Affairs. The life hazard use fees will follow the annual schedule listed by the New Jersey Uniform Fire Code.

**113-27: Additional Required Inspections and Fees**

In addition to the inspections and fees pursuant to the Act and the regulations of the Department of Community Affairs, all other structures and buildings not defined as "life-hazard uses" shall be inspected not less than once every two years.

**\*\*NON-LIFE HAZARD FEES\*\***

<u>Local Code</u>	<u>Fee</u>	<u>Description</u>
R-1 .....	42.00	Residential, multi-family, 1-3 units
R-2 .....	90.00	Residential, multi-family, 4-10 units
R-3 .....	120.00	Residential, multi-family, 11-20 units
R-4 .....	150.00	Residential, multi-family, 21-40 units
R-5 .....	180.00	Residential, multi-family, 41-60 units
R-6 .....	210.00	Residential, multi-family, 61-80 units
R-7 .....	240.00	Residential, multi-family, 81-100 units
R-8 .....	340.00	Residential, multi-family, 101 units and up
C-1 .....	42.00	Commercial/industrial, less than 3,000 sq. feet
C-2 .....	77.50	Commercial/industrial, 3,001-9,000 sq. feet
C-3 .....	155.00	Commercial/industrial, 9,001-15,000 sq. feet
C-4 .....	193.75	Commercial/industrial, 15,001-25,000 sq. feet
C-5 .....	232.50	Commercial/industrial, 25,001-50,000 sq. feet
C-6 .....	271.25	Commercial/industrial, 50,001-100,000 sq. feet
C-7 .....	310.00	Commercial/industrial, 100,001-200,000 sq. feet
C-8 .....	348.75	Commercial/industrial, 200,001-300,000 sq. feet
C-9 .....	400.00	Commercial/industrial, 300,001-400,000 sq. feet
C-10 .....	450.00	Commercial/industrial, 400,001-500,000 sq. feet
O-1 .....	42.00	Other use group requiring inspection

**\*\*PERMIT FEES\*\***

**113-28:** The permit fee established by the Uniform Fire Code shall not be amended and will change as the Uniform Fire Code changes.

A..... Type 1: 42.00

D.....Type 4: 497.00

B..... Type 2: 166.00

E.....Type 5: Reserved

C..... Type 3: 331.00

\*Fees for Borough of Lindenwold sponsored events will be waived