

TOWNSHIP of MIDDLETOWN – BUREAU of FIRE PREVENTION

One Kings Highway, Middletown NJ 07748



APPLICATION FOR REGISTRATION OF BUSINESS (LHU)

(Please type information into fillable fields below or print form & type or print clearly)

BUDDY SKELLY
Fire Official
(732)615-2270

Business Name (or DBA)

1. Date of Application _____
2. Block: _____ Lot: _____
3. Name of Business _____
4. Physical Address of Business _____
5. Name of Shopping Center or Office Building _____
6. Premises Phone Number _____
7. NJ Life Hazard Use (LHU) Registration # _____

Business Information (check one): Corporation LLC Partnership Individual Non-Profit

1. Registered Name _____
2. Mailing Address _____
3. City, State, Zip _____
4. Phone _____ Email _____
5. Business Fed ID#: _____

Business Owner Personal Information

1. Business Owner's Name _____
2. Business Owner's Home Address _____
3. Business Owner's City, State, Zip _____
4. Business Owner's Phone _____ Email _____

Send Mail To (check one): Property Business Owner Building Owner Property Manager

Property/Building Owner and, if applicable, Property Manager Information

1. Landlord Name _____
2. Landlord Mailing Address _____
3. Landlord Phone _____ Fed ID #: _____
4. Property Manager Company _____
5. Property Manager Address _____
6. City, State, Zip _____
7. Property Manager Contact _____ Phone _____

Key Holders for Emergencies After Hours:

Contact #1 Name: _____ Phone: _____
Address: _____ Email: _____

Contact #2 Name: _____ Phone: _____
Address: _____ Email: _____

Contact #3 Name: _____ Phone: _____
Address: _____ Email: _____

Business Use Information

Describe what your business does: _____

Are Hazardous Materials stored on premises? Yes No (If yes, provide MSDS)

Pre-1977 Construction? Yes No

BCO Issue date: _____

LHU Use Code: _____

Number of stories: _____

Number of stories below grade: _____

Square Footage by floor: _____

Total Square Footage: _____

Occupancy Load: _____

Number of Exits: _____

Grade Height: _____

Construction Type:

Frame Masonry & Concrete Masonry Steel Exterior Masonry Wall & Frame Combination

Type 1A – Concrete Type 1B – Concrete

Type 2A – Steel Type 2B – Steel Type 2C – Steel

Type 3A – Masonry/Wood Type 3B – Masonry/Wood

Type 4 - Heavy Timber

Type 5A – Wood Type 5B – Wood

N/A

Roof Construction: Concrete Metal Truss Wood N/A

Roof Coverings:

Asphalt Shingles Asphalt/Tar Metal Rubber Slate Tile N/A

Truss Roof Construction: Yes No

Roof Truss Type: Bowstring Metal Steel Bar Joist Wood N/A

Number of Roof Hatches: _____

Number of Roof Skylights: _____

Solar Panels?: Yes No

Heating System Fuel Source: Gas Oil Electric Other _____

Type: Forced Air Hot Water/Radiator Radiant Steam None N/A

Alternate Power Source: Solar Geothermal Wind None N/A

Back-Up Power Source: Battery Emergency Generator None N/A

Emergency Generator Powered Devices (if applicable choose all that apply):

Emergency Lights Exit Lights Fire Detection System None N/A

Do you have a Fire Sprinkler System? Yes No

Do you have a Kitchen Hood Suppression System? Yes No

Do you have a Fire Alarm System? Yes No

Alarm Company Name _____

Alarm Company Phone _____

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.

Print Name _____

Title _____

Signature _____

Date _____