



## EWING TOWNSHIP DIVISION OF FIRE PREVENTION

MUNICIPAL COMPLEX 2 JAKE GARZIO DRIVE, EWING, NJ 08628 (609) 883-2900 Ext 7677 FAX (609) 406-1384

To All Ewing Township Businesses:

This is your notice with regards to the Annual Fire Registration, under which the Uniform Fire Safety Code requires you to be registered. Due to the establishment of the Fire Inspection Program, the Township Commercial Business License has been eliminated and replaced with the Fire Code Registration. This is MANDATORY, to be renewed on an annual basis; otherwise, you may be subject to fines.

As you may know, the State of New Jersey enacted a statewide Uniform Safety Code. This code applies to all structures, EXCEPT one and two family dwellings. It establishes the minimum standards for fire safety and establishes registration fees, permit fees and penalties for enforcement procedures.

Please complete the attached application forms and return them to the Ewing Township Code Enforcement/ Fire Prevention Office at the above address, along with a check or money order for the appropriate fee amount. Please mark the front of the envelope Attention Fire Prevention.

This year's fee schedule, as adopted by Ordinance No. 05-21, is based on the square footage of the business premises, as follows:

<b><u>0-1,000 sq. ft.</u></b>	<b><u>\$50.00</u></b>
<b><u>1,001-5,000 sq. ft.</u></b>	<b><u>\$100.00</u></b>
<b><u>5,001-15,000 sq. ft.</u></b>	<b><u>\$135.00</u></b>
<b><u>15,001-30,000 sq. ft.</u></b>	<b><u>\$250.00</u></b>
<b><u>Over 30,001 sq. ft.</u></b>	<b><u>\$500.00</u></b>

- A.) Each individual leased space and building of a complex shall be billed separately.
- B.) Billing dates, penalties. Billing for the basic inspection fees will take place in Jan. of each year. Fees are due to the Township by **JANUARY 31** of the same year. **Failure to remit the required fee by JANUARY 31<sup>ST</sup> will result in a penalty equal to the amount to the basic fee.**
- C.) Your business will be inspected on an annual basis.

In addition, the New Jersey Uniform Fire Safety Code provides for permits for certain activities or processes done on a daily basis. Attached you will find a Permit Survey Form; if any of the activities or processes apply to your business, you MUST indicate the appropriate type of permit on the application and apply the corresponding fee (In addition to the square footage fees). If you should have a question as to whether the permit applies to your business, please contact our office so that we may assist you in this determination. Permit fees are as follows:

<b>Type I</b>	<b>\$54.00</b>
<b>Type II</b>	<b>\$214.00</b>
<b>Type III</b>	<b>\$427.00</b>
<b>Type IV</b>	<b>\$641.00</b>

**Exception:** There shall be no fee for Type 4 permits for storage or activity at premises registered as a life hazard use

<b>Type V</b>	<b><u>Reserved</u></b>
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You must total the amount and submit the appropriate fee, along with the completed application. Please make checks payable to the **Township of Ewing**. If you should have any questions concerning this matter, please contact Lisa Litz at (609) 883-2900 ext. 7677. Or you may email her at LLitz@ewingnj.org

Sincerely,

James J. Hall Jr.  
Fire Marshal

**YOU MUST COMPLETE THIS FORM OR IT WILL BE DEEMED INCOMPLETE**

**TOWNSHIP OF EWING  
DIVISION OF FIRE PREVENTION**  
\_\_\_\_ \_ (FILL IN YEAR)

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

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

**Telephone #:** \_\_\_\_\_ **BLK-** \_\_\_\_\_ **LOT** \_\_\_\_\_

**Email Address-** \_\_\_\_\_

**OWNERSHIP INFORMATION**

1. Name of Business Owner: \_\_\_\_\_

2. Address of Business Owner: \_\_\_\_\_  
\_\_\_\_\_

3. Phone # of Business Owner: \_\_\_\_\_

4. Name of Property Owner: \_\_\_\_\_

5. Address of Property Owner: \_\_\_\_\_  
\_\_\_\_\_

6. Phone # of Property Owner: \_\_\_\_\_

7. Officers of Business: (If Applicable)

**NAME** **ADDRESS**

**BUSINESS INFORMATION**

1. Type of Business: \_\_\_\_\_

2. Fire Insurance Carrier: \_\_\_\_\_

**Policy Number:** \_\_\_\_\_ **Policy Amount:** \_\_\_\_\_

3. Number of Employees: Full Time: \_\_\_\_\_ Part Time: \_\_\_\_\_

4. Floor Area of Business: \_\_\_\_\_

**EMERGENCY INFORMATION**

This information will be kept on file with the Police Dispatcher and the Code Enforcement Office in the event of a problem at your business after hours. Please list at least two names, preferably those with keys and close enough to come out if needed by police or fire officials.

**NAME** **TELEPHONE #**

**NAME** **TELEPHONE #**

**NAME** **TELEPHONE #**

I hereby certify that the statements made by me on this application are true, complete and correct to the best of my knowledge, and are made in good faith.

**NAME** **SIGNATURE** **DATE**

**\*\*\*\*FOR OFFICE USE ONLY\*\*\*\***

**CASH** \_\_\_\_\_ **CHECK#** \_\_\_\_\_ **CREDIT CARD** \_\_\_\_\_ **TOTAL AMOUNT** \_\_\_\_\_

**DATE** \_\_\_\_\_ **RECEIVED BY** \_\_\_\_\_

**YOU MUST COMPLETE THIS FORM OR IT WILL BE DEEMED INCOMPLETE**

**TOWNSHIP OF EWING  
DIVISION OF FIRE PREVENTION  
EMERGENCY INFORMATION FORM**

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**Name of Business:** \_\_\_\_\_

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

**Telephone#** \_\_\_\_\_

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**PART I: Hazardous Materials Inventory (if applicable)**

Please list below any hazardous or toxic substances which are stored, manufactured, or utilized by your business. If you need more space, or have a listing of your own, please submit along with this form.

	MATERIAL NAME	QUANTITY	WHERE STORED
1.	_____	_____	_____
2.	_____	_____	_____
3.	_____	_____	_____
4.	_____	_____	_____
5.	_____	_____	_____
6.	_____	_____	_____
7.	_____	_____	_____
8.	_____	_____	_____
9.	_____	_____	_____
10.	_____	_____	_____
11.	_____	_____	_____
12.	_____	_____	_____

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**PART II: Alarm Information**

Is the property alarmed? Yes / No    Type of alarm system: Burglar \_\_\_\_\_ Fire \_\_\_\_\_ Other \_\_\_\_\_ (Specify)

Name & Address of alarm service company: \_\_\_\_\_  
\_\_\_\_\_

Alarm company telephone number: \_\_\_\_\_

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**EMERGENCY CONTACTS**

Name \_\_\_\_\_ Telephone \_\_\_\_\_

Name \_\_\_\_\_ Telephone \_\_\_\_\_

**TOWNSHIP OF EWING  
DIVISION OF FIRE PREVENTION  
PERMIT SURVEY**

**TYPE I PERMITS**

1. \_\_\_\_\_ Bonfires
2. \_\_\_\_\_ Torch to remove paint
3. \_\_\_\_\_ Tents exceeding 1200 sq. ft
4. \_\_\_\_\_ Individual portable kiosks erected in a covered mall for less than 90 days
5. \_\_\_\_\_ Open flame in public assembly
6. \_\_\_\_\_ Welding and cutting
7. \_\_\_\_\_ Fireworks, explosives, blasting caps
8. \_\_\_\_\_ Helistops
9. \_\_\_\_\_ Occasional use for assembly

**TYPE II PERMITS**

1. \_\_\_\_\_ Bowling Lane refinishing
2. \_\_\_\_\_ Fumigation or fogging
3. \_\_\_\_\_ Membrane covered, air supported structure
4. \_\_\_\_\_ Carnivals, circus
5. \_\_\_\_\_ Use of covered mall for:
  - \_\_\_\_\_ Kiosks, display booth in more than 25% of common area
  - \_\_\_\_\_ Temporary place of assembly
  - \_\_\_\_\_ Open flame
  - \_\_\_\_\_ Display of liquid/gas equipment
  - \_\_\_\_\_ LPG/LNE in 5lb. Containers-

**(Storage outside of buildings of LP-gas cylinders when a part of a cylinder exchange program)**

**TYPE III PERMITS**

1. \_\_\_\_\_ Industrial furnaces gas/oil not exceeding 1400'
2. \_\_\_\_\_ Wrecking yard or junk yard
3. \_\_\_\_\_ Storage or discharge of fireworks

**TYPE IV PERMITS**

1. \_\_\_\_\_ Storage / use of 2,000 cu. ft. of flammable compressed gas
2. \_\_\_\_\_ Production or sale of Cryogenic liquids or storage or use of more than 10 gallons of LOX or flammable Cryogenes

**BUSINESS NAME:**

**ADDRESS:**

**TELEPHONE # :**

**TYPE IV PERMITS (CONT'D)**

3. \_\_\_\_\_ Storage/handling of flammable liquids in closed containers/tanks
4. \_\_\_\_\_ Install/remove tank
5. \_\_\_\_\_ Class I liquids in excess of 5 gal. in dwelling
6. \_\_\_\_\_ Storage/use of Class II or III liquids, 25 gal. in building
7. \_\_\_\_\_ Storage of flammable/combustible liquids in tank
8. \_\_\_\_\_ Manufacturing, processing or refining
9. \_\_\_\_\_ Storage or handing of the following:
  - \_\_\_\_\_ 55 gal. of corrosives
  - \_\_\_\_\_ 500 lb. oxidizers
  - \_\_\_\_\_ 10 lb. organic peroxides
  - \_\_\_\_\_ 500 lb. nitromethane
  - \_\_\_\_\_ 1,000 lb. ammonium nitrate
  - \_\_\_\_\_ 1 millicurie of radium not sealed in source
  - \_\_\_\_\_ Dry amount of radioactive material licensed by NRC
  - \_\_\_\_\_ 10 lb. flammable solids
10. \_\_\_\_\_ Installation of LPG or LNG 2,000 gal. individual or 4,000 gallons aggregate
11. \_\_\_\_\_ Storage/use of 10 lb. of magnesium
12. \_\_\_\_\_ Heliports

**TYPE V PERMITS**

1. \_\_\_\_\_ Airports

**Owners/Occupant Certification:**

I certify that the activities listed above are conducted at my premises:

\_\_\_\_\_ SIGNATURE

\_\_\_\_\_ DATE

Time/Date of Survey

Name of Inspector

Signature of Inspector

Inspection Number

Staff Review

Records

**TOWNSHIP OF EWING  
DIVISION OF FIRE PREVENTION  
LIFE HAZARD USE SURVEY**

**TYPE A LIFE HAZARDS**

1. \_\_\_\_\_ Service stations, repair, fueling
2. \_\_\_\_\_ Daycare center, day nurseries
3. \_\_\_\_\_ Hotels, motels, 2 stories w. interior egress
4. \_\_\_\_\_ Rooming, boarding homes, group homes, residential nursing homes
5. \_\_\_\_\_ Eating/drinking establishment (more than 50)
6. \_\_\_\_\_ Eating establishment more than 50, less than 200
7. \_\_\_\_\_ Eating / drinking establishment (more than 50)
8. \_\_\_\_\_ Above ground storage of flammable or combustible (greater than 660, less than 50,000)
9. \_\_\_\_\_ Dry cleaning with Non-flammable solvents

**TYPE B LIFE HAZARDS**

1. \_\_\_\_\_ High Rise
2. \_\_\_\_\_ Prisons, other restraint facilities
3. \_\_\_\_\_ Institutions, including outpatient, dialysis, alcohol treatment, abortion centers
4. \_\_\_\_\_ Movie theaters
5. \_\_\_\_\_ Eating/drinking, more than 50, less than 200
6. \_\_\_\_\_ Eating/drinking more than 200
7. \_\_\_\_\_ Mercantile greater than 12,000 sq.ft.
8. \_\_\_\_\_ Hotels, 4 stores or 100 rooms interior egress
9. \_\_\_\_\_ Windowless space, 50 or more, non-compliant

I concur that these activities take place at my premises:

\_\_\_\_\_ DATE  
OWNER/OCCUPANT

**INSPECTOR'S SIGNATURE**

**UCC USE GROUP**

**RECORDS**

BUSINESS NAME:  
ADDRESS:  
TELEPHONE #:

**TYPE B LIFE HAZARDS (CONT'D)**

10. \_\_\_\_\_ Assemblies more than 100; museums, lecture halls, art galleries, recreation centers
  11. \_\_\_\_\_ Spraying with flammable, combustibles
  12. \_\_\_\_\_ Industrial processes:
    - \_\_\_\_\_ Explosive dusts
    - \_\_\_\_\_ Crop ripening
    - \_\_\_\_\_ Lumber yards w/more than 100,000ft
    - \_\_\_\_\_ Tire recapping, rebuilding
    - \_\_\_\_\_ Organic coating manufacturer/producing 1 gal. or more per day
    - \_\_\_\_\_ Manufacturer of cellose nitrate plastics
    - \_\_\_\_\_ Handling of 100 cubic feet of loose combustible vegetable animal fibers
    - \_\_\_\_\_ Manufacturing of matches, explosives
    - \_\_\_\_\_ Processing of flammable, combustible liquids
    - \_\_\_\_\_ Welding/cutting, except Class I permit
  13. \_\_\_\_\_ Storage of the following:
    - \_\_\_\_\_ 2500 cu.ft. packing cases, boxes barrels
    - \_\_\_\_\_ 2500 cu.ft. tires, cotton, rubber, cork
    - \_\_\_\_\_ 25 lbs. cellulose nitrate plastic
    - \_\_\_\_\_ 100 cu.ft combustible vegetable animal fibers
    - \_\_\_\_\_ 25 cases of matches
    - \_\_\_\_\_ Explosives, blasting agents
    - \_\_\_\_\_ 50,000 gallons flammable/ combustible liquids above ground
  14. \_\_\_\_\_ Dry cleaning with flammable solvents
  15. \_\_\_\_\_ Atriums 12,000 sq.ft., 3 stories
- TYPE C LIFE HAZARDS**
1. \_\_\_\_\_ Theatres with stage access, seating
  2. \_\_\_\_\_ Night clubs, 200 or more
  3. \_\_\_\_\_ Amusement (funhouses, haunted houses, etc.)
  4. \_\_\_\_\_ Institutional, hospital, nursing homes