



## Glassboro Bureau of Fire Prevention

10 South Poplar St.  
Glassboro, NJ 08028

856-881-9230 ext. 88350 – 856-307-0516 (fax)

**L.E.A. - 0806001**

1. Name of business:

\_\_\_\_\_

2. Business address:

\_\_\_\_\_

3. Business phone number:

\_\_\_\_\_

4. List all buildings and their uses in detail on this property:

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

5. Hours of operation: (ex. 9 am to 5 pm Monday through Friday)

\_\_\_\_\_

6. Height of building (in feet:)

\_\_\_\_\_

7. Number of stories/floors:

\_\_\_\_\_

8. Gross square footage of each floor:

\_\_\_\_\_

9. Year building was built:

\_\_\_\_\_

10. Name, address, phone number and email of business owner (applicant:)

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

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

Local: L806 \_\_\_\_\_ State: \_\_\_\_\_ Date rcv'd: \_\_\_\_\_

Business name: \_\_\_\_\_



11. Name, address, phone number and email of building owner:

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

12. Name address and phone number of person(s) responsible for maintenance:

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13. Names and phone numbers of three (3) people to contact for emergencies:

#1 \_\_\_\_\_  
#2 \_\_\_\_\_  
#3 \_\_\_\_\_

I certify that all statements made by me in the registration form 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 affiant

\_\_\_\_\_  
Printed name of affiant

Local: L806 \_\_\_\_\_ State: \_\_\_\_\_ Date rcv'd: \_\_\_\_\_

Business name: \_\_\_\_\_