

Borough of Sea Bright Bureau of Fire Safety

1167 Ocean Avenue
Sea Bright, N.J. 07760
PHONE: 732-842-0099 –Ext.30 FAX: 732-741-3116

APPLICATION FOR FIRE SAFETY PERMIT

Date of Application:	Date Activity will occur:
Location of Activity:	
Applicant:	Cost of Permit:
Address:	Telephone:

The above named applicant hereby requests permission to conduct the following activity at the indicated location:

I HEREBY ACKNOWLEDGE THAT I HAVE READ THIS APPLICATION, THAT THE INFORMATION GIVEN IS CORRECT, AND THAT I AM THE OWNER, OR DULY AUTHORIZED TO ACT IN THE OWNERS BEHALF AND AS SUCH HEREBY AGREE TO COMPLY WITH THE APPLICABLE REQUIREMENTS OF THE FIRE CODE AS WELL AS ANY SPECIFIC CONDITIONS IMPOSED BY THE FIRE OFFICIAL.

Signed _____ Title _____

Print Name of Signer _____

Make Checks Payable to: The Borough of Sea Bright,

For more information call 732-842-0099 ext. 30

This is for a FIRE SAFETY PERMIT ONLY.