# **BOROUGH OF FANWOOD FIRE PREVENTION BUREAU**

75 NORTH MARTINE AVENUE, FANWOOD NEW JERSEY 07023 PHONE: (908) 322-5326 FAX: (908) 322-8945 Email-tscalera@fanwoodnj.org

# **OFFICE OF THE FIRE OFFICIAL**

## Dear Fanwood Business Owner/Operator,

It is required that all buildings, structure, used and premises in the Borough of Fanwood pay and undergo annual inspections by Fanwood Local Enforcement Agency The Fanwood Bureau of Fire Prevention as per Chapter 54 of the Code of the Borough of Fanwood and Borough Ordinance 96-10-R adopted June 13,1996

The attached Bureau of Fire Prevention Registration Form must be completed and returned with the appropriate fee to the address below within thirty (30) days Appendix "A" attached, will assist you in completing this registration form

## BOROUGH OF FANWOOD 75 NORTH MARTINE AVENUE FANWOOD NJ 07023

Every Person or business must respond. Even though registration may not be necessary, the application must be returned within (30) days with all applicable items completed. Failure to conform will constitute a violation of Borough Ordinances and mat subject you to penalty of up to \$500.00 maximum for each occurrence

## Please make out Check to the Borough of Fanwood

## Local Enforcement Agency Fanwood Bureau of Fire Prevention Office of the Fire Official

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#### BOROUGH OF FANWOOD APPENDIX A FIRE PREVENTION FEE SCHEDULE

Description

#### 1. A Assembly

A-1 Eating established under 50	\$55.00
A-2 Take-out food service (no seating)	\$55.00
A-3 Church or synagogue	\$55.00
A-4 Recreation center, multi-purpose rooms, ect	\$65.00
Fewer than 100	
A-5 Court rooms, libraries, fraternal organizations	
Condominium center fewer than 100	\$65.00
A-6 senior citizen centers fewer than 200	\$65.00

#### 2. B Business/professional

B-1 professional use 1& 2 story less than 5,000sq. ft	\$55.00
B-2 1 &2 story more than 5,000sq. ft. less than 10,000 sq.ft.	\$65.00
per floor	
B-3 1 & 2 story more than 10,000 sq. ft	\$75.00
B-4 3 & 5 Story more than 5,00 sq. ft. per floor	\$100.00
B-5 3 & 5 Story more than 5,000 sq. ft. less than 10,000	\$200.00
B-6 3 & 5 Story over 10,000 sq. ft. per floor	\$250.00

#### 3. R Retail (mercantile)

M-1 1 &2 Story less than 5,000sq. ft. per floor	\$65.00
M-2 1 & 2 Story more than 5,000sq. ft less than 10,000	\$100.00
M-3 1 & 2 Story more than 10,000 sq. ft. per floor	\$125.00
M-4 3 & 5 Story less than 5,000 sq. ft. per floor	\$150.00
M-5 3 & 5 story more than 5,000 sq. ft. less than 10,000sq.ft.	\$200.00
M-6 3 & 5 story over 10,000sq.ft	\$250.00

### 4. M Manufacturing (factory)

F-1 1 & 2 story less than 5,000sq. ft. per floor \$75.00

F-2 1 & 2 story more than 5,000sq.ft. less than 10,000sq. ft.	\$100.00
Per floor	
F-3 1 & 2 story more than 10,000sq. ft.	\$150.00
F-4 3 & 5 story than 5,000 sq. ft. per floor	\$150.00
F-5 3 & 5 story more than 5,000 sq. ft. less than 10,000sq.ft.	\$200.00
F-6 3 & 5 story over 10,000sq.ft	\$250.00
FEE SCHEDULE	

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#### 5. S Storage

S-1 1 & 2 story less than 5,000sq. ft. per floor	\$75.00
S-2 1 & 2 story more than 5,000sq.ft. less than 10,000sq. ft.	\$100.00
Per floor	
S-3 1 & 2 story more than 10,000sq. ft.	\$150.00
S-4 3 & 5 story than 5,000 sq. ft. per floor	\$150.00
S-5 3 & 5 story more than 5,000 sq. ft. less than 10,000sq.ft.	\$200.00
S-6 3 & 5 story over 10,000sq.ft	\$250.00

#### 6. Range and hood extinguishing systems

1 to 10 heads	10.00
11 to 25 heads	15.00
25 or more heads	25.00

#### 7. Fire detection systems

1 to 10 detection devices	10.00
11 to 25 devices	15.00
25 to 100 devices	25.00
100 or more devices	50.00

#### 8. Fire suppression systems

 1 to 10 heads
 10.00

 11 to 50 heads
 15.00

 51 to 100 heads
 25.00

 For each 100 heads over original 100 heads
 10.00

9. Above fee schedule shall cover initial inspection and one (1) reinspection. Any further inspection required to gain compliance shall be billed at \$25.00 each additional visit.

#### **BOROUGH OF FANWOOD REGISTRATION FORM** Page 3

1. Are you the owner or representative of the business or as defined in Appendix "A" on page 1 of the application? ( ) Yes ( ) No

2. **(A).** If your answer is "No" to item #1 describe the building type and / or uses or business you do own.

2. **(B)**. If your answer is "Yes" to item #1 describe briefly the type and / or uses or business as per Appendix A Attached.

3. Name Of Busi	ness Owner:	
		_Town:
State:	Zip:	Home Phone:
E-Mail		
Address:		Town:
State:	_Zip:	Business Phone:
		ENANT IN THE BUILDING, PLEASE LIST
		TE SHEET OF PAPER. INCLUDE ALL THE ABOVE
INFORMATION	FOR EACH TH	ENANT ON THAT SEPARATE SHEET OF PAPER.
6. Building Own	er:	
Owner Address_		Town:
Town:		State:
Zip Code:		_Phone Number:

7. Floor Area of Uses or Business:	Square Feet.
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8. Occupant Capacity as determined by the Local Enforcing agency\_\_\_\_\_Persons NOTE>NUMBER OF PERSON IF NONE HAS BEEN DETERMINED WRITE NOT APPLICABLE.

9. **Certify** that all statement made by me are true. I am aware that if any of the foregoing statement made by me are willingly false, I am subject to punishment.

Signature of Name		Print Name		
Address		Town	State	Zip Code
Name	EMERGER Number	CY CONTA	<u>CT NUMBER</u> To	wn
1				
2				