



Bert Steinmann, Mayor

Michael Nelson
Fire Official/ Fire Marshal

EWING TOWNSHIP FIRE DEPARTMENT Bureau of Fire Prevention

1666 PENNINGTON RD, EWING, NJ 08618 OFFICE (609) 882-9885 Ext 112 CELL (609) 462-8791 Email – mnelson@ewingnj.org

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:

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

- A.) Each individual leased space and building of a complex shall be billed separately.
- B.) Billing dates, penalties. Billing for the basic registration 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 31ST 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:

Type I	\$54.00
Type II	\$214.00
Type III	\$427.00
Type IV	\$641.00

Exception: There shall be no fee for

Type 4 permits for storage or activity at premises registered as a life hazard use

Type V	<u>Reserved</u>
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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 llitz@ewingnj.org.

YOU MUST COMPLETE THIS FORM OR IT WILL BE DEEMED INCOMPLETE

**TOWNSHIP OF EWING
OFFICE OF THE FIRE MARSHAL
2023**

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: _____

3. Policy Number: _____ Policy Amount: _____

4. Number of Employees: Full Time: _____ Part Time: _____

5. 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**

Name of Business: _____

Address: _____

Telephone# _____

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.	_____	_____	_____

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: _____

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
Inspector

Name of Inspector

Signature of

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:

OWNER/OCCUPANT

DATE

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