Verona Township Fire Prevention Bureau 880 Bloomfield Avenue Verona, NJ 07044 Phone: 973 857-4761 Fax:

Application for Fire Permit

Location Information

Mun Code:	Block:	Lot:	Qualifier:	Registration #:		
Name:				Address:		
City:				County:		
State:		Zip Code:		Telephone:		
			Applicant Ir	formation		
Name:			Address:			
City:				County:		
State:		Zip Code:		Telephone:		
Permit R	equested for foll	owing Dates	Start Date:	End	Date:	
Permit Requested for one year				End Date:		
				manufacturing of the		
	sey Uniform Fire	e Code as well	l as any spec	ct, and agree to comp ific conditions impose penalties as provided	d, and, if not, this	
Applicants Signature		Title			Date	
MAKE CHECKS PAYABLE TO		Township of Verona			AND MAIL TO:	
			Verona	nfield Avenue NJ, 07044 AL USE ONLY		
Permit Type: _		Conditions Impose			ng Payment of \$	