



Township of Parsippany-Troy Hills

Division of Fire Prevention

EMERGENCY
POLICE FIRE MEDICAL
DIAL 911

Physical Address: 1130 Knoll Road, Lake Hiawatha, NJ 07034
Mailing Address: 1001 Parsippany Blvd., Parsippany, NJ 07054
Business Phone: (973)-263-7166 Business Fax: (973)-334-0307
e-mail - fireprev@parsippany.net

PERMIT APPLICATION

The Uniform Fire Code states:

"Permits shall be required, and obtained from the local enforcing agency..." N.J.A.C. 5:70-2.7(a)

Please print clearly. Fill out the applicable permit section and sign the bottom.

A. Assembly Event:

Application Date: _____ Applicant's Name: _____
Event/Activity Date: _____ Set-Up Times: _____ Event Times: _____
Name of Venue: _____
Address of Event: _____ # of people attending: _____
Contact Person of Event: _____ Contact Phone: _____
Organization/Company Hosting Event: _____
Type of Activity: _____

Pipe & Drape Use - Flame Certification (Required)

Food Served - Copy of Temp Food Permit

Floor Plan Attached (Required All Events)

Attention: Hanging of decorative material on walls and ceilings is prohibited. Fire doors and hallways must be kept clear at all times. Absolutely no pyrotechnics or smoke machines of any kind are permitted.

B. All Other Permits:

Hotwork/Roofing Cooking Operations Cutting/Welding Tents

Storage of Flammables/Combustibles:

Specify type & quantity: _____

Storage Method Used: _____

Business Name: _____

Address of Site: _____

Contractor Name: _____ Contractor Phone: _____

Job Supervisor: _____ Supervisor Phone: _____

For All Applicants:

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 owner's behalf and as such hereby agree with the applicable requirements of the Fire Code as well as any specific conditions imposed by the Fire Official. Permit can be revoked at any time per N.J.A.C. 5:70-2.7(f).

Applicant's Signature

For Office Use Only

Permit Type

Fee Amount

Date

Check Number

F.O. Initials