

DATE

### **Borough of Flemington**

38 Park Avenue Flemington, New Jersey 08822 Phone (908) 782-8840 Fax (908) 782-0142

#### ZONING OFFICE CHANGE OF TENANCY / OWNERSHIP ALL INFORMATION SHALL BE PROVIDED

PROPERTY OWNER INFORMATION				
FULL NAME:	EMAIL:			
OFFICE PHONE:	CELL:			
	TENANT INFORMATION			
NEW TENAN	T/BUSINESS OWNER CONTACT INFORMATION			
CONTACT NAME:	CONTACT CELL:			
CONTACT MAILING ADDRESS:				
CONTACT EMAIL:				
TENA	NT OCCUPANCY INFORMATION FEE - \$50			
ADDRESS:	BLOCK: LOT: ZONE:			
UNIT/SUITE#:	FLOOR#: SF OF UNIT:			
# OF EMPLOYEES:	HOURS OF OPERATION:# OF VEHICLES:			
STATE IN DETAIL THE PROPOSED SERVICES TO	BE PERFORMED AND/OR THE VARIETY OF GOODS TO BE SOLD/STORED AT THIS LOCATION			
	CICNATUDEC			
I CERTIFY THAT THE ANSW	SIGNATURES  ERS ARE TRUE ANO COMPLETE TO THE BEST OF MY KNOWLEDGE			
	ERS ARE INCE AND COMILETE TO THE DEST OF MIT KNOWLEDGE			
PROPERTY OWNER/LANDLORD	TENANT/BUSINESS OWNER			

DATE



## **Borough of Flemington**

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#### CONSTRUCTION OFFICE APPLICATION FOR NEW OWNER / NEW TENANT CERTIFICATE

NAME:		////////	
ADDRESS:		FEE: <u>\$100.00</u>	
CITY / STATE / ZIP		CHECK # / CASH	
CELL PHONE #:			
		USINESS INFORMATION	
BUSINESS OWNER	R NAME:	BLOCK: _	
NAME OF BUSINE	SS:	LOT:	
BUSINESS ADDRE	SS:	ZONE:	
BUSINESS PHONE	:		
		DATE:/	
	OFFI	CE USE ONLY	
	SUB-CODE (	OFFICAL'S APPROVAL	
BUILDING:	DATE:	ELECTRICAL: DATE:	
PLUMBING:	DATE:	FIRE: DATE:	
CONSTRUCTION C	OFFICAL APPROVAL		
APPROVED:	DENIED:	REASON:	
	DFFICIAL'S SIGNATURE: _		
DATE:	_	John Tillotson, Construction Official	

## Flemington Borough BUREAU OF FIRE SAFETY

#### BUSINESS REGISTRATION FORM

ALL business owners and those of Life Hazard Use businesses must complete and file this form in accordance with the Uniform Fire Safety Act (N.J.A.C. 52:27D-192 et seq.). Failure to do so may result in a penalty of up to \$1,000.00.

ALL information must be completed in full in accordance with State of New Jersey and Borough requirements.

#### **Business/Corporation Mailing Address:** If Private or Individual: Name: First Middle Give FULL legal Name of Ownership, Including Corporation, Incorporation, Partnership, T/A etc. P.O. Box Number or Street Name and Number Including Building Number and Suite Number State: \_\_\_\_\_ Federal Employer (Tax ID) Number Social Security Number (Private / Individual Only Business / Corporate / Individual Phone Number: Business / Corporate / Individual E-mail Address: **Business Ownership: (Mark Correct Type)** Private / Individual Partnership Condominium Corporation \_\_\_\_ Cooperative \_\_\_\_ Government Agency \_\_\_\_ LLC Property / Business Type: **Registered Agent:** Name of Person to Receive Registered Mail: First ΜI E-mail: Business Phone Number: Emergency Contact: Last First ΜI E-mail: Cell Phone Number: Business Owner: ΜI First Cell Phone Number: On Site Contact: Last First ΜI

Cell Phone Number:

Property Owner Information:				
Name of Property Owner:		usiness or Individual	1 FULL Name	
Address of Dromouty Oyyman				
Address of Property Owner:				
City of Property Owner:				Zip Code:
Property Owner Telephone Number: _		E-mail <sub>_</sub>		
<b>Building Information: Physical Nam</b>	ne and Location (	of the Business (AL	L information M	UST be Provided)
Building / Business Name:				
Use Group:				
Block: Lo	ot:			
Street Address:				
Number of Stories:		amber of Floors Bel	ow Grade:	
Total Square Footage:	Bı	ıilding Height:		Number of Exits:
Occupant Load:	Co	onstruction Type:	H	Ieating Fuel Source:
Briefly Describe the Building Type: _				
Briefly Describe the Use of the Busine				
DATE OF BUSINESS OPENING OF	R TRANSFER O	F OWNERSHIP OF	F EXISTING BU	SINESS:
***** IF THRE ARE ANY QUESTI	ONS WHEN CO	MPLETING THE	REGISTRATIO	ON FORM, PLEASE CONTACT THE
BUREAU OF FIRE SAFETY FOR	GUIDANCE PRI	OR TO SUBMITT	TING THE REG	ISTRATION AT (908)782-8840 X227.
	BUREAU	OF FIRE SAFETY	USE ONLY	
Use Code(s):				
New Application: Tr	ansfer:	Date	e Received:	

Date Entered into Dynamics:

Assigned State Number 1009-\_\_\_\_\_



# HUNTERDON COUNTY COMMUNICATIONS BUSINESS FILE CHANGE FORM FLEMINGTON BOROUGH



Please Update the Follo	wing Business: _	Not in E	Business Li	ist	_ Updated Contact Info
Requested by:Flemin	gton Borough Fire	e Safety_	Date R	Requeste	ed:
Municipal No: FLEMINGTON BORO – 49	Information Provid	led By:		Date Su	bmitted:
TYPE OF INFORMATION:	New		_Update		
If new, what business does it	replace:				
Name of Business:					
Address- (MUST include str	eet):		SU	JITE:	
Day Telephone:	Complex	Name/Landm	ark:		
EMERGENCY CONTACT	PERSONNEL (MUS	ST include all	area code	es)	
1. Name:		<del>-</del>	Γitle:		
CELL:	HOME:		EMAIL	L:	
2. Name:		Т	itle:		
CELL:	HOME:		_ EMAIL	.:	
3. <b>Name:</b>			Title:		
CELL:	HOME:		_ EMAIL	.:	
4. <b>Name:</b>		Т	itle:		
CELL:	HOME:		_ EMAIL	.:	
Alarm Co:		Alar	m Phone:_		
Hazards/Misc Info:					
Please Undate this Informat	ion As Soon As Bossibl	le and email to	COMMUNIC	CATIONS	ACO HIINTERDON NILLIS

Please Update this Information As Soon As Possible and email to: <a href="mailto:communications@co.hunterdon.nj.us">communications@co.hunterdon.nj.us</a>
ATTENTION: FRANK-83 and to<a href="mailto:communications@co.hunterdon.nj.us">FIRANK-83</a> and to<a href="mailto:communications.nj.us">FIRANK-83</a> and to<a href="mailto:commun

Communications use only:					
Entered by:	Business #	Date Updated:			

## The information provided on this form is for Emergency informational use, by Police, Fire, or Rescue Services personal.

The information collected on this form is sent to the Hunterdon County 9-1-1 Center and entered into the Secure Computer Aided Dispatch program. In the event of an Emergency, the information will be used by the Communications Center Staff at the Request of Emergency Responders on scene to contact, the individuals listed in numerical order (Until contact is made with someone). To either request a response from a Key Holder, or to provide information pertinent to an emergency situation that has occurred at or near your business.

It is important that when filling out this form that the persons listed are those who have key access to the business, are able to respond in a timely manner if requested, or have the ability to have someone with a key respond.

This information is used to augment any information that your landlord, or alarm company may have. If you experience a change in staff and need to update this form you can request an update form by either:

- 1. Sending an email to the address on the front of this form requesting a new form,
- 2. Call Hunterdon County Communications at 908-788-1202,
- 3. Call Flemington Borough Fire safety at (908) 782-8840, ext 227; or
- 4. Call the Flemington Borough Police Department at 908-782-3434

Thank you for your assistance.