



**Morristown Fire Department  
Fire Prevention Bureau  
161 Speedwell Ave.  
Morristown, NJ 07960**

**Michael D. Geary  
Fire Marshal, UFD  
Tel: 973-292-6602  
Fax: 973-898-9673**

**APPLICATION  
FOR PERMIT**

PERMIT # -

MUNICIPAL CODE – 1424	REGISTRATION #
NAME OF BUSINESS IN MORRISTOWN FOR PERMIT:	
ADDRESS OF THE BUSINESS IN WHICH THE PERMIT IS REQUESTED:	
MORRISTOWN, NJ 07960	COUNTY OF MORRIS
PHONE # OF THE BUSINESS IN WHICH PERMIT IS REQUESTED:	

**APPLICANT INFORMATION:**

APPLICANT'S NAME -
APPLICANT'S ADDRESS -
APPLICANT'S PHONE #

- [ ] PERMIT REQUESTED FOR THE FOLLOWING DATE(S): \_\_\_\_\_ (or)  
 [ ] PERMIT REQUESTED FOR ONE YEAR – EXPIRATION DATE OF DECEMBER 31st.: \_\_\_\_\_

NOTE – ATTACH ADDITIONAL SIGNED SHEET IF SPACE IS INSUFFICIENT

The above named applicant hereby requests permission to conduct the following activity at the above location:

\_\_\_\_\_

And/or for the storage, occupancy, use, sale, handling, or manufacturing of the following:

\_\_\_\_\_

State quantities and method for each category or material to be stored or used:

\_\_\_\_\_

I hereby acknowledge that the information given is correct, and agree to comply with the applicable requirements of the New Jersey Uniform Fire Code as well as any specific conditions imposed, and, if not, this permit may be revoked and *I will be subject to penalties as provided by law.*

Applicant's Signature	Print Name	Title	Date
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MAKE CHECKS PAYABLE TO **MORRISTOWN FIRE PREVENTION** AND DROP OFF OR MAIL TO:

Morristown Fire Prevention  
Attention: Fire Marshal  
161 Speedwell Ave.  
Morristown, NJ 07960

*FOR OFFICIAL USE ONLY:*

Permit Type: _____	[ ] Approved	[ ] Conditions Imposed	[ ] Denied	[ ] Approval Pending Payment \$ _____
Fire Official Signature: _____				