



Raritan Bureau of Fire Prevention

16 Anderson St, Raritan N.J. 08869
Ofc: 908-231-9476 / Fax: 908-231-9650

Daniel Lawson – Fire Official
“Raritan Fire Prevention and you, partners in Safety”

Public Event Fire Prevention

Upon the approval from the Borough of Raritan Mayor and Council, below is a list of typical activities which require a permit application, and subsequent inspection by the Bureau of Fire Prevention

- **Bonfires – Require Local and NJ Forestry Permit**
- **Open Flame – Use of any open flame, or flame producing device in connection with a public gathering. (Food Truck / Mobile or Stationary Cooking)**
- **Tent – Any tent being used larger than 30x30, or 30 linear feet.**
- **Indoor Gatherings – Gatherings in buildings not already registered as a Life Hazard Use**

****All permits above are \$54.00 (as of June 2022, subject to change, dependent on State Fire Code.)****

When in doubt, contact our office directly
Office: 908-231-9476

Fire Official – Daniel Lawson (dlawson@raritan-nj.org) 908-635-8336

Raritan Bureau of Fire Prevention

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New Business Registration

-----Part A – Business Registration Information-----

1. Business Ownership (mark the correct box):

(0)____Corporation (1)____Private / Individual (2)____Partnership (3)____Condominium
(4)____Cooperative (5)____Government Agency (6)____LLC Corporation

2. Business/Corporation Mailing Address:

If Private / Individual: Name: _____
Last First Middle Initial

If Other: _____
Give FULL Legal Name of Ownership, Including Corporation, Incorporated, Partnership, T/A etc.

Address: _____
PO Box Number or Street Number and Name

City: _____ State: _____ Zip Code: _____

3. Person To Receive Certified Mail Or Other Notices. If Same As Owner, Write “Same.” (Address must not be a PO Box)

Name: _____

Address: _____
Number Street Name

City: _____ State: _____ Zip Code: _____

Telephone: (_____) _____ Email: _____

4. Briefly describe the building types and / or uses or businesses you own. If business serves food is the establishment a BYOB? __ Yes __ No

5. Name of Building or Business:

Building Location: _____
(Number and Street)

Suite or Room Number: _____

6. _____ _____ _____
 Block Number Lot Number Square Footage

----- Part B – Certification -----

7. **I certify that all statements made by me on this registration application are true. I am aware that if any of the foregoing statements made me are willfully false, I am subject to punishment.**

Signature of Owner or Agent Completing This Form Date

Printed Name of Owner or Agent Completing this Form Title

_____ (____)____ - _____

Street Address of Owner or Agent Completing This Form Phone

City State Zip Code



RARITAN BOROUGH
Raritan Bureau of Fire Prevention
16 Anderson Street
Raritan, NJ 08869
Phone: (908) 231-9476

Application for Fire Permit

Location Information

Mun Code:	Block:	Lot:	Qualifier:	Registration #:
Name:				Address:
City:				County:
State:		Zip Code:		Telephone:

Applicant Information

Name:		Address:
City:		County:
State:	Zip Code:	Telephone:
Email:		

- ☐ Permit Requested for following Dates Start Date: _____ End Date: _____
- ☐ Permit Requested for one year End Date: _____

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 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.

Applicants Signature

Title

Date

MAKE CHECKS PAYABLE TO _____

Borough of Raritan

AND MAIL TO:

22 First Street
Raritan NJ, 08869

FOR OFFICIAL USE ONLY

Permit Type: _____ ☐ Conditions Imposed ☐ Denied ☐ Approved Pending Payment of \$ _____

Daniel Lawson, Fire Official