



Township of Princeton
 Bureau of Fire Prevention
 400 Witherspoon Street
 Princeton, N. J. 08542-3400
 609-921-8020 Office
 609-688-2026 Fax

APPLICATION FOR PERMIT

Type 4. \$546.00

TIME PERIOD LIMITED/SPECIFIC
 ANNUAL

Hazardous Materials - Permit Application

Please provide the following requested information in order that a proper determination can be made on your fire safety permit application.

Date of Application	Location where activity will occur:	Dates(s) of Activity:
Physical Address / Block & Lot		

APPLICANT (State if Corporation Partnership, or Individual)

Name :	
Address:	
Telephone :	Fax :

List number, size and type of containers/cylinders/tank(s) used.
Product Name(s).
Used for :
<input type="checkbox"/> MSDS <input type="checkbox"/> HSFS (Must be attached to complete application unless prior approved or prior submission)

Checklist

<input type="checkbox"/> Is work area readily available for inspection & Free of combustibles	<input type="checkbox"/> If storage is in a separate room or area properly identified with placarded or signs.	<input type="checkbox"/> Regulators & assemblies approved type for commodity and working order.
<input type="checkbox"/> Right-to-Know labeling Posted	<input type="checkbox"/> No smoking signs posted in work area.	<input type="checkbox"/> Portable fire extinguisher present

Signed Title

Print Name

FOR OFFICIAL USE ONLY

Date Received	Date Reviewed	Date Approved	Fee Paid	Check #	Expires
Date Issued	Permit #				
Comments					