



**Township of Princeton
Bureau of Fire Prevention**

400 Witherspoon Street
Princeton, N. J. 08540-3496
609-921-8020 Office
609-688-2026 Fax

APPLICATION FOR PERMIT

TYPE 1 \$42.00

TIME PERIOD LIMITED/SPECIFIC

Torch Applied Roof – Permit Application

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

Date of Application	Contact Name:
Location where work will be conducted	

APPLICANT (State if Corporation Partnership, or Individual)

Business Name			
Business Address			
Telephone		Fax	

Starting Date:		Expected finish date.	
Type of Work to Conducted		Type of Torch to be use (make & model)	
Sq Ft of Roof Area to be worked on (Approx)		Number of cylinders or tanks at work site	
<input type="checkbox"/> Site Diagram on Back (Hand Drawn is acceptable) Seating diagram (table, chairs layout-Exits etc)			

Checklist (Completed by Contractor)

<input type="checkbox"/> Fire Extinguisher ready and available when torch work is being conducted	<input type="checkbox"/> Type of Extinguisher you plan to have Last Service date _____	<input type="checkbox"/> Will a water hose be available (connected to Water Source)
<input type="checkbox"/> Pressure reading on Extinguisher _____	<input type="checkbox"/>	<input type="checkbox"/> Must remain on site for 30 minutes after last torch use.

Signed Title

Print Name

FOR OFFICIAL USE ONLY

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