



WESTFIELD FIRE DEPARTMENT

1029 Central Avenue Westfield, NJ 07090

(908) 789-4145

fireprevention@westfieldnj.gov

LOCAL REGISTRATION FORM

Pursuant to the N.J. Uniform Fire Code, in effect in the Town of Westfield, you are hereby requested to supply the information listed below within FIFTEEN DAYS of receipt of this application. **FAILURE TO RESPOND TO THIS REGISTRATION SURVEY WITHIN FIFTEEN (15) DAYS WILL RESULT IN A PENALTY OF \$500.00 FOR EACH OCCURRENCE.**

PLEASE PRINT CLEARLY

NAME OF BUSINESS: _____

ADDRESS OF BUSINESS/BUILDING: _____

MAILING ADDRESS (if different): _____

PHONE NUMBER: _____

OCCUPANCY LOAD: _____ BUSINESS SQUARE FOOTAGE: _____

TYPE OF BUSINESS: _____

OF EMPLOYEES ON SITE AT ONE TIME: _____

Is there cooking at the establishment? YES ☐ NO ☐

Is alcohol served at the establishment? YES ☐ NO ☐ Bring your own? YES ☐ NO ☐

Are there classes at the establishment? YES ☐ NO ☐

Are there any Hazardous/Biohazard materials on site? YES ☐ NO ☐

Of Apartments within building: _____

BUSINESS OWNER:

NAME: _____

ADDRESS: _____

PHONE: _____

EMAIL ADDRESS: _____

☐

Mail Notices to

BUILDING OWNER:

NAME: _____

ADDRESS: _____

PHONE: _____

EMAIL ADDRESS: _____

☐

Mail Notices to



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BUSINESS EMERGENCY CONTACT: _____

PHONE NUMBER: _____ EMAIL: _____

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Is there a fire alarm system in the building? YES ☐ NO ☐

Required to be inspected annually and copies of inspection reports sent to Fire Prevention office

Is it centrally monitored by an alarm company? YES ☐ NO ☐

Is there a sprinkler system in the building? YES ☐ NO ☐

Required to be inspected annually and copies of inspection reports sent to Fire Prevention office

Is there a Kitchen Suppression System in the building? YES ☐ NO ☐

Required to be inspected every 6 months and copies of inspection reports sent to Fire Prevention office

Is there a fire department Key Knox box located on the building? YES ☐ NO ☐

If so, are the keys up to date in the key box?

YES ☐ NO ☐

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Prevention Bureau 1029 Central Avenue
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