

4. Federal Employer ID Number:

## Application for Life Hazard Use

You must completely fill this form out. Do not leave anything blank. If you have any questions please call 973-857-4761

NAME OF BUSINESS:		
		ZIPCODE:
	OWNERSHIP INFO	<u>ORMATION</u>
1. Ownership Type:		
□ Individual/Sole	Proprietorship ☐ Corporation	LLC
2. For Individual/Sole I	Proprietorship:	
First Name:	La	st Name:
Address:		
3. For Other Types of (	Ownership:	
Organization Nam	ne:	
Mailing Address:		
Phone Number: _		
Email Address: _		
First Name:	La	st Name:
i iist Name		

6. If you answered NO to Question 5:	
Agent First Name:	Last Name:
Address:	
7. Property Ownership Contact:	
First Name:	Last Name:
Address:	
8. Emergency Contact #1:	Last Namo:
	Last Name:
Email Address:	
9. Emergency Contact #2:	
First Name:	Last Name:
Address:	
Job Title:	
Email Address:	

5. Registered Agent Same as Owner?  $\ \square$  Yes  $\ \square$  No

## **BUILDING INFORMATION**

1. Pre 1977 Construction:   Yes   No   CO Date
2. Block: Lot:
3. # of Stories:
4. # of Stories Below Grade:
5. Total Square Feet:
6. Maximum Occupancy:
7. # of Exits:
8. Grade Height:
<ul> <li>9. Construction Type:  □Frame □Masonry and Concrete □Masonry Steel □Exterior Masonry Wall and Frame  □Combination  □Type 1A - Concrete □Type 1B - Concrete □Type 2A - Steel □Type 2B - Steel □Type 2C - Steel □Type 3A - Masonry/Wood □Type 3B - Masonry/Wood □Type 4 - Heavy Timber  □Type 5A - Wood □Type 5B - Wood □N/A</li> <li>10. Heat Fuel Source:</li> </ul>
□Electric □Gas □Geothermal □Liquified Natural Gas (LNG) □Liquified Petroleum Gas (LPG) □Oil □Wood □None □N/A
11. <b>Heat Type</b> : □Forced Air □Hot Water/Radiator □Radiant □Steam □None □N/A
12. <b>Alternate Power Source</b> : □None □N/A □Solar □Geothermal □Wind
13. Back-Up Power Source:  □None □N/A □Battery □Emergency Generator □Multiple Grids from Power Company
14. Emergency Generator Powered Devices:  □Select All □Emergency Lights □Exit Lights □Fire Detection System □N/A

15. Roof Characteristics: # of Roof Hatches
16. Roof Construction: □Concrete □Metal □Truss □Wood □N/A Roof Coverings: □Select All □Asphalt Shingles □Asphalt/Tar □Metal □Rubber □Slate □Tile □N/A Roof Truss Type: □Bowstring □Metal □Steel Bat Joist □Wood □N/A
17. Truss Roof Construction: □Yes □No
18. # of Roof Skylights:
19. <b>Solar Panels:</b> □ Yes □ No