EWING TOWNSHIP DIVISION OF FIRE PREVENTION

MUNICIPAL COMPLEX 2 JAKE GARZIO DRIVE, EWING, NJ 08628 (609) 883-2900 Ext 7677

2024 ANNUAL FIRE REGISTRATION FOR NON-OWNER OCCUPIED RESIDENTIAL RENTAL PROPERTIES

IN ACCORDANCE WITH THE NJ Uniform Fire Safety Act, N.J.S.A. 52:27D-192 ET SEQ., the New Jersey Uniform Fire Code, N.J.A.C. 5:70-1 et seq., shall be enforced in all non-owner-occupied single-family dwellings. See Division of Fire Safety Bulletin 2010-2 for guidance. Ewing Township will be enforcing this code as stated.

Enclosed is your notice for the Annual Fire Registration, as required by the Uniform Fire Code and Ewing Township Ordinance # 05-21, the establishment of the Fire Inspection program is mandatory, and registrations, renewals and inspections will be conducted on an annual basis. Failure to register will result in a fine double the registration fee. (Township Code chapter 100-1 sect 1 D 5 (b) YOU MUST ALSO SCHEDULE YOUR ANNUAL FIRE PREVENTION INSPECTION !!!!

NOTE: ALL REGISTRATIONS & FEES NOT SUBMITTED AND PAID BY January 31, 2024. WILL RESULT IN THE ISSUANCE OF A VIOLATION AND FINES IMPOSED.

Please complete the attached application forms and return them to the Ewing Township Code Enforcement/Fire Prevention Division, at the above address, along with a check or money order for the appropriate fee amount.

PLEASE NOTE YOUR TOTAL SQUARE FOOTAGE OF LIVING SPACE AND MARK THE APPROPRIATE FEE:

YOUR SQ FT IS FEE \$

This year's fee schedule, as adopted by ordinance no. 05-21, is based on the square footage of this business premises, as follows:

0 - 1,000 sq ft \$ 50.00 1,001 - 5,000 sq ft \$ 100.00 5,001 - 15,000 sq ft \$ 135.00 15,001 - 30,000 sq ft \$ 250.00 Over 30,001 sq ft \$ 500.00

Note: IF THE REGISTRATION FEE IS NOT PAID BY THE DATE SPECIFIED, PENALTIES WILL BE CHARGED, AS TO DOUBLE THE REGISTRATION FEE.

(Township Code chapter 100-1 sect 1 D 5 (b)

You must submit the appropriate fee, along with the completed application. Please make checks payable to the Township of Ewing.

TOWNSHIP OF EWING	Owner's Name:
NON-OWNER OCCUPIED	
RENTAL PROPERTY	Rental Address:
2024	
	Telephone #:BLKLOT
	Email Address
i. Name of Landiord:	
2. <mark>Address of Landlord</mark> :	Rental Address: Telephone #:BLKLOT Email Address- ATION NTS RESIDING IN THE PROPERTY: TAGE OF LIVING SPACE ATTACH A FLOOR PLAN OF YOUR INTERIOR MEASUREMENTS) ***** (Specify) Type of alarm system: Burglar Fire Other vice company: which is a system of the with the Police Dispatcher and the Code Enforcement Office our rental property after hours. Please list at least two names, d close enough to come out if needed by police or fire officials. TELEPHONE # TELEPHONE #
Phone # of Landlord:	
1 none # of Landioru.	
NAMES OF ALL TENANTS RE	ESIDING IN THE PROPERTY
2.	
3.	
4.	
<u></u> 5.	
6.	
7 .	
8.	
10.	
TOTAL SQUARE FOOTAGE O	OF LIVING SPACE
******(PLEASE ATTAC	RER OCCUPIED ROPERTY Rental Address: Telephone #:BLKLOT Email Address- PINFORMATION
	OWNER OCCUPIED FAL PROPERTY 2024 Telephone #:BLKLOT Email Address-
Alarm Information	
Marin Information	(Specify)
Is the property alarmed? Yes / No T	ype of alarm system: Burglar Fire Other
Name & Address of alarm service com	pany:
Alarm company telephone number:	
EMERGENCY INFORMATION	
preferably those with keys and close en	ough to come out if needed by police or fire officials.
NAME	TELEPHONE #
NAME	TELEPHONE #
NAME	TELEPHONE #
<u> </u>	OD OFFICE USE ONLV***
DATE	RECEIVED BY