

625 E. Plum Street - P.O Box 1508 - Vineland - New Jersey 08362-1508

## Torch down / roof Type 1 Permit Application

Date of application:	Annual Fee: \$54
Mall Activity location	
Date(s)	Event Time
Trade Name	
Applicants Name	
Applicants Address	
Contact (Cell Number)	Email
The above named applicant hereby requests permission to conduct the following activity:	
Number of propage tanks?	
I hereby acknowledge that I have read this application, that the information given is correct, and that I am the owner, or duly authorized to act in the owner's behalf and as such hereby agree to comply with the applicable requirements of the fire code as well as any specific conditions imposed by the fire official.	
Signature	Print
For Official use only	
Date received In:	spector Payment (check#)
Notes	