



BUREAU OF FIRE PREVENTION
 TOWN-VILLAGE OF HARRISON
 ALFRED F. SULLA, JR. MUNICIPAL BUILDING
 1 HEINEMAN PLACE
 HARRISON, NEW YORK 10528



Telephone: (914) 670-3130
 Fax: (914) 670-3170

APPLICATION FOR ANNUAL PERMIT

DATE OF APPLICATION: _____ FEE: _____

TYPE OF PERMIT: Commercial Fire Suppression/Sprinkler Smoke & Heat Detection
 Chemical / Overcooking Equipment Gases used for Welding
 Commercial Storage of Flammable Liquids Day Care/Nursery

BUILDING LOCATION: _____
 (Street address, city, state, zip)

Building Square Footage _____

CONTACT NAME & PHONE NUMBER:

NAME OF PROPERTY OWNER: _____

ADDRESS: _____
 (Street address, city, state, zip)

OWNER'S PHONE NUMBER:

NAME(S) OF COMMERCIAL TENANT(S), IF ANY (attached a list if several):

TYPE OF BUSINESS: _____

NOTE: A TEST CERTIFICATION FROM YOUR FIRE ALARM COMPANY, FIRE SPRINKLER COMPANY, OR COMPANY MAINTAINING A CHEMICAL /OVER COOKING SUPPRESSION SYSTEM MUST BE SUPPLIED WITH THIS APPLICATION. THIS CERTIFICATION MUST BE FROM THE CURRENT YEAR.

***ANNUAL PERMITS EXPIRE ON DECEMBER 31ST.**

A check for the fee, made payable to the Town of Harrison, must be returned to this office along with the application and test certification.