



INCORPORATED VILLAGE OF PORT JEFFERSON

Building & Planning Department

88 North Country Road, Port Jefferson, NY 11777

Ph (631) 473-4744 Fax (631) 473-2049

www.portjeff.com

Dear Proprietor:

Pursuant to Chapter 139-11 of the Code of the Incorporated Village of Port Jefferson

You are required to file for a Business Registration Certificate along with a \$25.00 fee as follows:

§139-11 Registration of Businesses

- A. All persons, corporations or other entities owning businesses in the Village of Port Jefferson and their landlords shall file a certificate of registration with the Fire Marshal in accordance with regulations as he shall prescribe.
- B. A new certificate of registration shall be filed with the Fire Marshal whenever any of the following situations occur:
 - (1) There is a change in the ownership of the business being conducted.
 - (2) There is manufactured, maintained, handled or kept chemicals, explosives, flammable liquids, gases or other hazardous materials which were not included in any previously issued certificate of registration.
 - (3) There is an alteration in the type of business or the activities for which a certificate of registration had been previously issued.
- C. In the event of any of the situations mentioned in Subsection B of this section, it shall be the obligation of the owners of such businesses and their landlords to file a new certificate of registration.

If you are the proprietor of an existing business with a valid Business Registration, please complete the enclosed registration form. There is no fee required for renewal.

Please note if there are Accessory Uses you are also required to apply for a Special Operating License.

Inspections will be forthcoming (see Code Reference Attachment).

Certificate is valid for three (3) years.
(See State code).

Send to:

Inc. Village of Port Jefferson Building Department
88 North Country Road
Port Jefferson, NY 11777

CODE REFERENCES:

INCORPORATED VILLAGE OF PORT JEFFERSON CHAPTER 139 FIRE PREVENTION

Article II. Administration and Enforcement

§139-11 Registration of business.

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 - (3) There is an alteration in the type of business or the activities for which a certificate of registration had been previously issued.
- C.** In the event of any of the situations mentioned in Subsection B of this section, it shall be the obligation of the owners of such businesses and their landlords to file a new certificate of registration.

NEW YORK STATE CODE TITLE 19 NYCRR PART 1204

Section 1204.12 FIRE SAFETY INSPECTIONS

- (a)** Beginning January 1, 1991, each State agency shall commence a program of periodic fire safety inspections of buildings within its custody. At least once every three years each State agency shall inspect for compliance with applicable provisions of the Uniform Code all buildings or portions thereof within its custody which are classified as low hazard storage (C4.1) or moderate hazard storage (C4.2) as defined by Parts 701 and 702 of Title 9 of the Official Compilation of Codes, Rules and Regulations. All other buildings or portions thereof within the custody of a State agency shall be inspected at least once per year. A report setting forth the findings of the inspection shall be prepared by the agency's code coordinator.
- (b)** Bona fide complaints alleging conditions in violation of the Uniform Code shall be investigated and when necessary inspections shall be conducted.
- (c)** State agencies shall correct all code violations within a reasonable amount of time after their discovery.
- (d)** Each State agency shall prepare and maintain a correction plan for all code violations which remain uncorrected 60 days after their discovery.



INCORPORATED VILLAGE OF PORT JEFFERSON

Bureau of Fire Prevention

88 North Country Road, Port Jefferson, NY 11777

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BUSINESS REGISTRATION APPLICATION

FEE \$25.00

Business Name (NOT Corporation or Owner's Name): _____

Business Address (Local Address NOT Corporate or Owner's Address): _____

Business Phone Number: _____ Tax Map No.: _____

Type of Business (Restaurant, Garage, Lumber Yard, Motel, etc.): _____

Are any **Hazardous Materials** stored or utilized at this premises?: ☐ YES ☐ NO

If yes, please list materials: _____

Fire Marshal will specify same: _____

Emergency Contact Person (AFTER REGULAR HOURS):

Name: _____ Phone: _____

Alternate to Above:

Name: _____ Phone: _____

Business Owner's Name (Individual, Partnership Name, Corporation Name): _____

Owner's Mailing Address: _____

Owner's E-Mail: _____ Phone: _____

If Partnership or Corporation, list TWO partners; indicate title.

Title (Partner, President, etc.): _____ Name: _____

Home Address: _____ Phone: _____

Title (Partner, Vice-President, etc.): _____ Name: _____

Home Address: _____ Phone: _____

Building Owner's Name: _____

Building Owner's Address: _____

Building Owner's Phone: _____

Form Completed By: _____ Date: _____

I understand that false statements made herein are punishable as a Class A misdemeanor pursuant to §210.45 of the New York State Penal Law. ☐ Read and acknowledged

Inspected & Approved By: _____ Date: _____