



INCORPORATED VILLAGE OF PORT JEFFERSON

Building & Planning Department

88 North Country Road, Port Jefferson, NY 11777

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www.portjeff.com

FIRE PREVENTION PERMIT APPLICATION

Tax Map No. \_\_\_\_\_

Date of Application: \_\_\_\_\_ Fee :\*( below) \_\_\_\_\_ Permit No. (FM use only): \_\_\_\_\_

\*Please` make checks payable to Inc. Village of Port Jefferson

Special Occupancy:

- |                          |                                    |       |
|--------------------------|------------------------------------|-------|
| <input type="checkbox"/> | Auto wrecking yards, junkyards     | \$500 |
| <input type="checkbox"/> | Dry-cleaning plants                | \$250 |
| <input type="checkbox"/> | Garages/motor vehicle repair shops | \$250 |
| <input type="checkbox"/> | Marine refueling stations          | \$150 |

Hazardous Storage/Use:

- |                          |   |  |
|--------------------------|---|--|
| <input type="checkbox"/> | Storage of combustible and flammable liquids: | \$300 (first 10,000 gal.)<br>add. \$0.01 per gal.in excess of 10,000 \$5,000 Max |
|--------------------------|---|--|

Liquified petroleum gas

- |                          |   |       |
|--------------------------|---|-------|
| <input type="checkbox"/> | Less than 2,000 gallons (installation only) | \$150 |
| <input type="checkbox"/> | 2,000 to 10,000 gallons (annually)          | \$250 |
| <input type="checkbox"/> | In excess of 10,000 gallons (annually)      | \$500 |
| <input type="checkbox"/> | Hazardous chemicals                         | \$200 |
| <input type="checkbox"/> | Storage of combustible fiber                | \$250 |
| <input type="checkbox"/> | Explosives, ammunition and blasting agents  | \$750 |
| <input type="checkbox"/> | Storage of readily combustible materials    | \$150 |
| <input type="checkbox"/> | Welding or cutting                          | \$100 |

Applicant Information:

Name of Business: \_\_\_\_\_

Business Owner Name: \_\_\_\_\_ Daytime Phone No.: \_\_\_\_\_

Street Address: \_\_\_\_\_

Mailing Address (if different): \_\_\_\_\_

Property Owner Name (if different from applicant): \_\_\_\_\_

Contact Person Name: \_\_\_\_\_ Phone No: \_\_\_\_\_

Email Address: \_\_\_\_\_

SIGNATURE OF APPLICANT (ALL PERMITS)

*The accuracy of the information, plans, diagrams and other facts submitted in conjunction with this application are the responsibility of the applicant.*

***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***

*This applicant hereby gives permission to Village of Port Jefferson Fire Marshal to conduct a fire safety inspection in accordance with Fire Prevention Code of State of New York*

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_