

## **BRISTOL TOWNSHIP**

## Office of the Fire Marshal

2501 Bath Road · Bristol, PA 19007 · (215) 785-0500 · Fax (215) 788-8541

## **FIRE PERMIT APPLICATION**

Application date:/ Permit #:		
Permit fee as per township fee schedule:	Receipt #	
Applicant name:		
Business name:		
Phone # Fax #	Square footage	to be occupied:
Street address:		Suite
City:	State:	Zip:
Type of business, work, or special event/activity	you are making applic	eation for:
Property owner:	Phone:	
Property owner's street address:		Suite:
City:	State:	Zip:
Previous business at this location (if applicable) _		
I hereby acknowledge that, I have read this application, that the duly authorized to act on the owner's behalf and hereby agree to all other applicable codes, laws, and ordinances. I understand to acceptable manner so as to secure the results intended by the applicable manner so as to secure the results intended by the applicable manner so as to secure the results intended by the applicable manner so as to secure the results intended by the applicable manner so as to secure the results intended by the application.	to comply with the application that all work must be conducted.	on requirements, township fire code, an cted, installed, and completed in an
Signature of applicant	Print name	
****** <u>DO NOT WRITE</u>	BELOW THIS LINE	<u> </u>
Use group IFC Code Section:	Approved:	Disapproved:
Fire Marshal comments/requirements:		
Fire Marshal		Date