



Vernon Township Bureau of Fire Prevention

21 Church Street

Vernon, New Jersey, 07462

Email: firemarshal@vernontwp.com



Phone: 973-764-4055 ext 2271

Fax: 973-764-4167

**WANTAGE TOWNSHIP  
Non Life Hazard Registration Form**

**Business Name:** \_\_\_\_\_

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

Business Type: \_\_\_\_\_

**Hours of Operation:** \_\_\_\_\_

**Business Owner:** \_\_\_\_\_

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

Phone: \_\_\_\_\_ 2<sup>nd</sup> # \_\_\_\_\_

**Building Owner:** \_\_\_\_\_

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

Phone Number: \_\_\_\_\_

**Emergency Contacts**

1 – Name: \_\_\_\_\_ Contact Number: \_\_\_\_\_

**Square Footage:** \_\_\_\_\_ **Stories:** \_\_\_\_\_ Attic \_\_\_\_\_ Basement \_\_\_\_\_

**Fire Alarm System:** Yes / No      Battery / Hard Wired      Local / Monitored

**Suppression System:** Yes / No      **Sprinkler System:** Yes / No

Please fill this out to the best of your ability and fax or mail back to the Address above.  
Thank you for your cooperation

**WANTAGE TOWNSHIP CONTRACTS WITH VERNON  
TO HANDLE FIRE PREVENTION SERVICE**