

Mansfield Township Bureau of Fire Prevention

3135 Route 206 South

Suite 4

Columbus NJ 08022

firemarshal@mansfieldtwp-nj.com

Phone-609-298-5325x102

Fax 609-298-8429

Please update your business and contact information
New for this year; you must provide an Email address!

FIRE SAFETY USE REGISTRATION Date _____

Business Name: _____

Business Type: _____

Address: _____

Business Phone Number (____)____-____ Business Fax. Number (____)____-____

E-Mail Address

Mail correspondence to: _____

Business Owner Name: _____

Address: _____ Phone: (____)____-____

Federal I.D. # ____ - ____ E-Mail Address _____

Property Owner Name: _____

Address: _____ Phone: (____)____-____

Federal I.D. ____ - ____ E-Mail Address _____

Emergency Contact (AFTER HOURS) must list three responsible persons with access and availability

Name: _____

Phone: _____

Name: _____

Phone: _____

Name: _____

Phone: _____

Note: any change in emergency contact information shall be immediately reported.

Manager / Contact- Name: _____

Phone Number: _____

Block and Lot _____ - _____

Number of stories: _____ Square footage of each Story: _____, _____, _____

Type of Construction: _____ Type of Roof support (Truss type) _____

Suppression System(s): _____

Alarm Company: _____