



# MINE HILL TOWNSHIP

Municipal Building ~ 10 Baker Street ~ Mine Hill, New Jersey 07803

Municipal Clerk  
Amanda G. Macchia  
RMC/CMR

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## Application for a Fire Safety Inspection

Point of Inspection:

Block: \_\_\_\_\_ Lot: \_\_\_\_\_ Address: \_\_\_\_\_

Owner Information:

Name: \_\_\_\_\_

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

Contact Telephone: \_\_\_\_\_

Person to Contact for Inspection (if different from Owner):

Company: \_\_\_\_\_

Name: \_\_\_\_\_

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

Contact Telephone: \_\_\_\_\_

Building/Inspection Information:

Number of Floors (including basement): \_\_\_\_\_

Number of Smoke Detectors: \_\_\_\_\_

Number of Carbon Monoxide Detectors: \_\_\_\_\_

Type of Home:

Single Family

Double Family

Town House/Condo

Other

Closing Date: \_\_\_\_\_

Applicant Signature: \_\_\_\_\_

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### FOR MUNICIPAL USE ONLY

Application Received by: \_\_\_\_\_

Received Date: \_\_\_\_\_

Fee Collected: \_\_\_\_\_