



# Fire Prevention Permit Application

Date completed application received: \_\_\_\_\_

Location of Real Estate: \_\_\_\_\_

Zoning District: \_\_\_\_\_

**Owner:** \_\_\_\_\_  
 name  
 \_\_\_\_\_  
 address/zip code  
 \_\_\_\_\_  
 phone \_\_\_\_\_ fax \_\_\_\_\_ e-mail \_\_\_\_\_

**Tenant:** \_\_\_\_\_  
 name  
 \_\_\_\_\_  
 address/zip code  
 \_\_\_\_\_  
 phone \_\_\_\_\_ fax \_\_\_\_\_ e-mail \_\_\_\_\_

**Contractor:** \_\_\_\_\_  
 name  
 \_\_\_\_\_  
 address/zip code  
 \_\_\_\_\_  
 phone \_\_\_\_\_ fax \_\_\_\_\_ e-mail \_\_\_\_\_

Purpose of Application:

Describe any hazardous materials that might be stored and the method of storage

I swear and affirm that the above statements are true and that all work will be done as described and in accordance with plans and specifications submitted and that the work will comply with all of the provisions of the Upper Merion Township Fire Prevention Code, and with all other applicable ordinances of Upper Merion Township.

I hereby agree that this applicant releases, discharges, and agrees to indemnify, defend and hold harmless, Upper Merion Township, its officers, agents, representatives, and employees of, from and against any liabilities, awards, losses, judgements or damages, which might arise whether or not such matters may be groundless or fraudulent by reason of issuance a Fire Prevention Use Permit as a result of this application.

A Certificate of Insurance is required naming Upper Merion Township as an additionally insured with the primary coverage of \$500,000 and an umbrella coverage of \$1,500,000.

signature of owner

signature of applicant

date

date

### FOR OFFICE USE ONLY:

FEE:   Payment must accompany application.

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