

Operational PERMIT APPLICATION

/Permit #

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TOWN OF WAPPINGER, COUNTY OF DUTCHESS, NEW YORK::OFFICE OF FIRE INSPECTOR

ACTIVITY OR OPERATION: **OPERATIONAL PERMIT** APPLICATION DATE: _____

NAME OF APPLICANT: _____ PHONE NO. _____

LOCATION: _____

TAX GRID NUMBER

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FIRE DISTRICT: Hughsonville New Hackensack Chelsea

PROPERTY OWNER: _____ PHONE NO. _____

ADDRESS OF OWNER: _____

Permits are not transferable, any change in activity, operation, location, ownership or use shall require a new permit.
Permits are required for the following: (Code of the Town of Wappinger)

All conditions, surroundings and arrangements to be in accordance with the Code of the Town of Wappinger and all applicable Codes of New York State.

Occupancy type: Gasoline Station Repair Garage Multi-Tenant Office Bldg. Auto Detailing Retail with Fire Alarm/Sprinkler system
 Other: _____

TANKS: AST Size and content: Good Oil: _____ Waste Oil: _____ Transmission Fluid _____ Anti Freeze: _____ Other: _____

COMPRESSED GASSES: Type and number of cylinders: _____

FIRE SUPPRESSION SYSTEM: TYPE _____ Make/Model _____

FIRE ALARM SYSTEM: Type/Make _____

MANAGER: _____
Email _____@_____
Emergency contact number: _____

APPLICANT SIGNATURE: _____

ANNUAL FEE **Amount: \$200.00** **DATE**
Receipt Number: **Check#** **Rec'd by:** _____

APPROVAL: _____ DATE: _____
Signature of Fire Inspector / Mark Liebermann/ Tyler Pettit