



Rumson / Fair Haven Fire Prevention Bureau
80 River Rd, Rumson NJ 07760
Pmurphy@rumsonnj.gov

BUSINESS REGISTRATION FORM

PROPERTY:

Name of Business: _____

Address: _____

Phone #: _____ Email: _____

Employer Identification Number (EIN) _____

BUILDING OWNER:

Name: _____

Home

Address: _____

Phone #: _____ Cell

#: _____ Email: _____

LLC Information if applicable : _____

BUSINESS OWNER:

Name: _____

Home

Address: _____

Phone #: _____ Cell

#: _____ Email: _____

LLC Information if applicable : _____

EMERGENCY CONTACT

Name: _____ Phone #: _____

Name: _____ Phone #: _____

Name: _____ Phone #: _____

BUILDING

Briefly Describe

Business: _____

BYOB: Yes / No

Does building have solar panels Yes / No

Does building have a basement Yes / No

Fire Alarm Service Company Information:

Name: _____

Description: _____

Phone: _____ Email: _____

Fire Sprinkler Company Information:

Name: _____

Description: _____

Phone: _____ Email: _____

Cooking Suppression Company Information:

Name: _____ Description: _____

____ Phone: _____

Email: _____

FIRE INSURANCE CARRIER

Carrier name:

Policy Amount: _____