CITY OF CAMDEN
FIRE DEPARTMENT
FIRE MARSHAL'S OFFICE
4 North 3rd Street Camden, New Jersey 08102
Phone (856) 757-7510   Fax (856) 757-7243
EMAIL: DaMunoz@ci.camden.nj.us

David Muñoz
Chief Fire Marshal

FIRE INSPECTION REGISTRATION FORM

Official Use Only

Local Registration #: _____   **State Registration #:** _____   **State:** _____

Business Name: _____

Street Address: _____ City/State: _____ Zip Code: _____

Block/Lot: _____   Do you…. ☐ Own   ☐ Lease the property (Check one)

Building Owner's Name: _____ **Federal I.D. #:** _____

Street Address: _____ Phone #: _____

Building Owner's Name: _____ **Federal I.D. #:** _____

Street Address: _____ Phone #: _____

Building Type: ☐ Individual   ☐ Partnership   ☐ Corporation   ☐ Other

Manager/Agent Name: _____

Street Address: _____ Emergency Contact #1: _____

Emergency Contact #2: _____ Emergency Contact #3: _____

Alarm Suppression System Information:

Describe System: _____ Monitor Company: _____

Phone #: _____

Description of Use/occupancy of this building/business: _____

Construction Information: _____ **Building Height:** _____

Truss Construction: FLOOR ☐   ROOF ☐   FLOOR/ROOF ☐

Standpipe System: _____ Sprinkler System: _____

Knox Box Location: _____ Special Hazards: _____

I CERTIFIED ALL STATEMENTS ABOVE ARE TRUE

Signature: _____ Print Name: _____

Address: _____