



Village of Lake Grove Fire Marshals Office  
 Post Office Box 708  
 Lake Grove, NY 11755  
 Voice: 516-807-6412  
 Fax: 866-884-5378  
 Email: [lakegrovefiremarshal@gmail.com](mailto:lakegrovefiremarshal@gmail.com)



**Operating/Assembly Permit/Business Registration Form**

If any part of this application is illegible, left blank or filled with inaccurate information, we will not issue a permit and your establishment will be closed. If we cant read it, we will have to reject it.

**ALL INFORMATION IS TO BE LEGIBLY PRINTED OR TYPED.**

2014/BRF

**1-BUSINESS INFORMATION**

Business Name:				
Address:				
Floor #	Suite#	Store Phone #	Store Fax #	Corporate store # (example Jim's #705)

**2-BILLING INFORMATION**

<input type="checkbox"/> Check here if the billing department address is the same as the store address. If it is, skip down to section 3				
Bill To:				
Department				
Billing Address:				
City	State	Zip Code	Billing Phone#	Billing Fax#
Billing Contact Name	Title	Phone	Fax	Email:

**3-OPERATIONAL INFORMATION**

Hours of operation:	Average # of employees per shift	Any Handicapped Employees? (Y or N)

**4-STORE MANAGER/RESPONSIBLE PARTY AFTER HOURS CONTACT INFORMATION**

	Name (First and Last)	Home Phone	Cell Phone	Email Address
Manager:				
Asst Mgr:				
Keyholder:				
District Mgr:				

5-KNOX BOX		Yes/No
Have the locks to access this store/bldg been changed in the past 12 months? (Yes or No)		
If your locks have been changed in the past 12 months, you must contact this office immediately & make arrangements to give us an updated key that we will place in the Knox Box.		

6-HAZARDOUS MATERIALS		Yes/No
Are there any hazardous or flammable materials being used or stored in any part of this occupancy? (Yes or No)		
If you answered yes to this question, you are required to complete and return a Hazardous Material Inventory Statement. If one was not found with this application, you can download it from the ONLINE FORMS section of the village website ( <a href="http://www.lakegroveny.gov">www.lakegroveny.gov</a> ).		

7-PREPLAN DIAGRAM		Yes/No
If the box to the right is checked, you are required to submit a preplan diagram to this office.		
This preplan diagram is critical and allows the fire department to understand the layout of your store/building.		

8-TENANT LIST		
If you are the landlord of this building and it is a multiple occupancy, you must provide this office with the occupant information for each suite		
Suite #	Floor	Occupant

**CERTIFICATION:** By printing and signing my name to this form, I state that I have completed all required paperwork and answered all questions truthfully and to the best of my knowledge. I am aware that providing false/inaccurate information is a misdemeanor under §210.45 of the New York State Penal Law. I am also aware that the information requested in this form is required to be filed under Village of Lake Grove Code §89-14A and failure to do so can result in this business be issued summons and/or closed.

Applicant Name (print)	
Applicant Signature	



