

**Town of Orangetown**  
**Bureau of Fire Prevention**  
**845-365-0204 Fax 845-365-0241**

Application for Certificate of Compliance Fire Safety General Occupancy  
Chapter 15, Article XXXIV Fire Prevention

Section:\_\_\_\_\_ Block:\_\_\_\_\_ Lot:\_\_\_\_\_

Name of Business:\_\_\_\_\_

Address of Business:\_\_\_\_\_

Hamlet:\_\_\_\_\_ Phone:\_\_\_\_\_

Description of Business:\_\_\_\_\_

Approximate Square Footage of Occupancy:\_\_\_\_\_ Fee:\_\_\_\_\_

Name of Contact Person:\_\_\_\_\_ Title:\_\_\_\_\_

Telephone Number:\_\_\_\_\_ Fax:\_\_\_\_\_

Name of Property Owner:\_\_\_\_\_

Address:\_\_\_\_\_

Fire Alarm System?\_\_\_\_\_ Date of Inspection:\_\_\_\_\_

Fire Sprinkler System?\_\_\_\_\_ Date of Inspection:\_\_\_\_\_

Fire Extinguishers?\_\_\_\_\_ Date of Inspection:\_\_\_\_\_

Is there storage or use of any Hazardous Materials?\_\_\_\_\_

If so, Separate Hazardous Material Permit Required.

For a new usage a copy of the floor usage must be attached.

Name of Applicant:\_\_\_\_\_

Signature of Applicant:\_\_\_\_\_ Date:\_\_\_\_\_

**Office Use Only**

Occupancy Classification:\_\_\_\_\_

Receipt # :\_\_\_\_\_ Fee:\_\_\_\_\_

Certificate of Compliance # :\_\_\_\_\_ Dated\_\_\_\_\_

Comments:\_\_\_\_\_

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