



**TOWNSHIP OF MAPLEWOOD**  
**Municipal Building, 574 Valley Street**  
**Maplewood, NJ 07040**  
**(973) 762-8120**

**Elizabeth J. Fritzen, R.M.C.**  
**Township Clerk**

**APPLICATION FOR PORTABLE HEATING DEVICES IN OUTDOOR CAFES, TENTS AND CANOPIES**

Print all information

Applicant:	Address:
City:	County:
State/Zip Code:	Phone: (     )

Location:

Type of Activity: <b>PORTABLE HEATING DEVICE IN PUBLIC</b>	Type of Fuel Used & Amount:
Type of Flame Producing Device:	Other:

Permit requested for the following date(s): \_\_\_\_\_

I hereby acknowledge that the information given is correct, and agree to comply with the applicable requirements of the Fire Code, as well as any specific conditions imposed, and, if not, this permit may be revoked and I will be subject to penalties as provided by law. No fee by order of the Maplewood Township Committee.

\_\_\_\_\_  
 Print Name

\_\_\_\_\_  
 Applicant Signature

\_\_\_\_\_  
 Title

\_\_\_\_\_  
 Date

**OFFICE USE ONLY**

PERMIT #: \_\_\_\_\_ PERMIT TYPE: \_\_\_\_\_ CONDITIONS IMPOSED: YES NO DENIED: \_\_\_\_\_ FEE: \_\_\_\_\_

Inspector approving/issuing permit: \_\_\_\_\_ DFS #: \_\_\_\_\_

Received: \_\_\_\_\_

PERMITS NON-TRANSFERABLE