

REQUEST FOR TIME EXTENSION

Bureau of Fire Prevention

Fire District #2

Township of Old Bridge

3098 Highway 516

Old Bridge, NJ 08857

Phone 732-970-6542

Fax 732-970-6545

Registration # _____

Original Inspection Date _____

Business Name _____

Business Address _____

Work which has been abated _____

Work that remains _____

Reason why extension is necessary _____

Date work will be completed _____

Pursuant to N.J.A.C. 5:70-2.10(d)2, an application for extension of time shall be deemed to be an admission that the Notice of Violation is factually and procedurally correct and that the violations do or did exist.

The following information MUST BE COMPLETED IN ORDER TO BE CONSIDERED, and the information CANNOT be the same as the Business Address or phone number, UNLESS the owner lives at the address year round.

OWNER'S ADDRESS _____

OWNER'S CITY, STATE, ZIP _____

OWNER'S PHONE NUMBER _____

_____ Date

_____ Printed name of owner or agent

_____ Signature of owner or agent

Your request for an extension of time to abate violation(s) at the above location is:

GRANTED: The new date by which compliance is ordered is _____

DENIED: The time limit originally imposed remains in effect.

Comments: _____

Failure to correct violations within the time limits set will result in the imposition of penalties and possibly other enforcement proceedings.

_____ Date

_____ Inspector Signature

Certification Number: _____