



FIRE MARSHAL'S OFFICE

TOWN OF GREECE

One Vince Tofany Boulevard

Greece, New York 14612

Phone (585)723-2309

Fax (585)723-2457

APPLICATION FOR PERMIT

DATE: _____

APPLICANT _____
(Name)

PROPERTY OWNER: (If same as applicant, mark "SAME")

(Number) (Street)

(Name)

(City) (State) (Zip)

(Number) (Street)

(Phone)

(City) (State) (Zip)

CONCERNING PROPERTY LOCATED AT:

(Number) (Street) (Zip)

(Phone)

Application is hereby made by the undersigned for a permit to:

- Operate a place of public assembly (restaurant, lounge, etc.)
- Store/dispense flammable liquids for retail sale
- Store/dispense flammable liquids for private use only
- Store hazardous materials
- Operate an LPG facility
- Other _____

at premises known as _____

The undersigned represents that this application for a permit as described herein will be in accordance with all ordinances of the Town of Greece and the New York State Uniform Fire Prevention & Building Code and that any plans or specifications submitted with this application are the plans or specifications relating to this permit and no other.

Signature of Applicant

OFFICE USE ONLY

PERMIT FEE \$ _____

RECEIPT# _____

Approved by Fire Marshal _____