

**BOROUGH OF OAKLAND**

**CODE ENFORCEMENT DEPARTMENT**

1 MUNICIPAL PLAZA OAKLAND, NJ 07436 201-337-8111

**OFFICE USE ONLY:**

DATE OF INSPECTION: \_\_\_\_\_

TIME: \_\_\_\_\_

**COMMERCIAL APPLICATION FOR CERTIFICATE OF CONTINUED APPROVAL FOR OCCUPANCY AND FIRE CERTIFICATE**

Fire Certificate and Certificate of Continued Approval for Occupancy Fee = \$250.00

CHECK OR EXACT CASH; ALL CHECKS TO BE MADE OUT TO 'OAKLAND BOROUGH'

**NO FIRE INSPECTION WILL BE SCHEDULED UNTIL BOARD OF HEALTH AND ZONING APPROVAL IS COMPLETED**

Above is needed for ALL tenant changes, ownership of building and/or ownership of business changes.

OFFICE USE: CERTIFICATE #: \_\_\_\_\_ DATE RECEIVED: \_\_\_\_\_ CHECK #: \_\_\_\_\_ CASH: \_\_\_\_\_

**Please Select one of the below:**

New Tenant To Building  Change of Business Ownership  Change of Building Ownership

**Proposed BUSINESS Information:**

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

Business Premise Phone: \_\_\_\_\_ Business Phone Number: \_\_\_\_\_

Business Email Address: \_\_\_\_\_

Business Property Address: \_\_\_\_\_

Block: \_\_\_\_\_ Lot: \_\_\_\_\_ Use Group: \_\_\_\_\_ Zone: \_\_\_\_\_ Occupancy load: \_\_\_\_\_

Building Total Sq Ft: \_\_\_\_\_ Sq Ft used by this Business: \_\_\_\_\_ Hours of Operations: \_\_\_\_\_

Type of Business Proposed: \_\_\_\_\_

Business Owner Name: \_\_\_\_\_

Business Owner Best Phone Contact: \_\_\_\_\_

Business Owner Best Email Contact: \_\_\_\_\_

Business/Owner Federal ID Number: \_\_\_\_\_

Mailing Address for Business (if different from Property Address):  
\_\_\_\_\_

Incoming Shipments per Week: \_\_\_\_\_ Outgoing Shipments per Week: \_\_\_\_\_

Type Conveyance: \_\_\_\_\_ Type Conveyance: \_\_\_\_\_

Product: \_\_\_\_\_ Product: \_\_\_\_\_

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

Is Business a Life Hazard? YES or NO

Number of at Employees at Opening: \_\_\_\_\_ at Closing: \_\_\_\_\_

Number of Customers/Visitors Approx. Daily: \_\_\_\_\_

Will you be dealing with the general public: (Please circle one) YES or NO

Number of days open weekly: \_\_\_\_\_ Gallons of water used per day: \_\_\_\_\_ (This MUST be Filled out)

Noise Extent: \_\_\_\_\_ Fumes/Orders: \_\_\_\_\_ Other Nuisances: \_\_\_\_\_

**Proposed BUSINESS Information Con't:**

**Will flammable Devices be Stored or Used: (Please circle one) YES or NO**

**Proposed Period of Occupancy: From \_\_\_\_\_ To \_\_\_\_\_**

**Business planned use, must include products, services sold or manufactured:**

\_\_\_\_\_  
\_\_\_\_\_

**If Planning Board approval (if needed), Approved On: \_\_\_\_\_**

**Site Plan submitted: (Please circle one if plan was needed) YES or NO**

**Fire Prevention:**

The information needed below is confidential and will only be used for fire emergency. This data is necessary to contact persons in charge of your facility in order to gain access in an emergency or to reset a fire alarm. However, if there are any signs of smoke, fire or any detectable orders, the fire department will force entry as necessary.

**Emergency Contacts able to Provide Access: (Please least at least 1 contact besides business/building owner.)**

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_

**Fire Alarm Information for Business:**

**Fire Alarm Company Name: \_\_\_\_\_**

**Fire Alarm Company Address: \_\_\_\_\_**

**Fire Alarm Company Phone Number: \_\_\_\_\_**

**Fire Alarm Company Email: \_\_\_\_\_**

**Sprinkler Information for Business:**

**Sprinkler Company Name: \_\_\_\_\_**

**Sprinkler Company Address: \_\_\_\_\_**

**Sprinkler Company Phone Number: \_\_\_\_\_**

**Sprinkler Company Email: \_\_\_\_\_**

**Security Alarm Information for Business:**

**Security Company Name: \_\_\_\_\_**

**Security Company Address: \_\_\_\_\_**

**Security Company Phone Number: \_\_\_\_\_**

**Security Company Email: \_\_\_\_\_**

**Insurance Company Information:**

**Name: \_\_\_\_\_ Phone #: \_\_\_\_\_**

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

**Email: \_\_\_\_\_ Policy #: \_\_\_\_\_**

\_\_\_\_\_

**BUILDING Information:**

*Please fill out below building owner information to the best of your ability. Please put N/A for any information that you do not know.*

**Building Owner/Business Name:** \_\_\_\_\_

**Building Owner Address (If different from Business Location):**

\_\_\_\_\_

**Building Owner Telephone:** \_\_\_\_\_

**Building Owner Email:** \_\_\_\_\_

**Building/Owner Federal ID Number:** \_\_\_\_\_

***Below must be filled out for zoning approval:***

**Previous Building/Business Use:** \_\_\_\_\_

**Previous Building/Business Name:** \_\_\_\_\_

**Please list all Tenants in Building by Name Only:**

\_\_\_\_\_

\_\_\_\_\_

**Building Structure information:**

Please fill out/circle below to the best of your ability.

**Basement:** YES or NO      **Attic:** YES or NO      **Number of Stories:** \_\_\_\_\_      **Elevator:** YES or NO

**Heating System:** GAS or ELECTRIC or OIL or HOT AIR or STEAM or HOT WATER

**Generator:** YES or NO      **Stairwell:** YES or NO **If yes how many stairwells:** \_\_\_\_\_

**Knox Box:** YES or NO

(A Knox Box is a small, wall-mounted safe that holds building keys for fire departments, emergency medical services.)

**Knox Box Location:** \_\_\_\_\_

**Utility Location:**

**Boiler Room Locations:** \_\_\_\_\_

**Fuel Shutoff:** \_\_\_\_\_ **Gas & Electric Shutoff Location:** \_\_\_\_\_

**Fire Department Connection:** \_\_\_\_\_ **Nearest Fire Hydrant Location:** \_\_\_\_\_

**Solar Panels:** YES or NO **If YES, emergency shut off Location:** \_\_\_\_\_

**Sprinkler Control valve location:** \_\_\_\_\_

**Fire Extinguisher:** YES or NO **If YES please list out locations:** \_\_\_\_\_

**Building Structure Information Continued:**

Square footage of building: \_\_\_\_\_ Square footage of space being leased: \_\_\_\_\_

Number of Stories: \_\_\_\_\_ Max Occupancy of Building: \_\_\_\_\_

Grade Height (Height of building in feet): \_\_\_\_\_

Roof Access: Yes or No

Backup Power Source (Please circle all that apply below):

Battery Emergency Generator Multi Grids from power company None Not Available

Emergency Generator Powered Devices (Please circle all that apply below):

Emergency Lights Exit Lights Fire Detection System None Not Available

Construction Type (Select all that apply below):

Frame Masonry & Concrete Masonry & Steel Combination Exterior Masonry Wall & Frame Combination Concrete – Type 1A or Type 1B Steel – Type 2A or Type 2B or Type 2C Masonry/Wood – Type 3A or Type 3B Heavy Timber – Type 4 Wood – Type 5A or Type 5B Not Available

Heat Fuel Source (Please circle all that apply below):

Forced Air Hot Water/Radiator Radiant Steam None Not Available

Emergency Shut Off Location: \_\_\_\_\_

Alternate Power Source: Solar Geo Thermal Wind None Not Available

**Operations or Special Activities Permits:**

Please list and describe each operations or special activities permit that will be needed for this building/business that is applying on this application. For example, if the business has a permanent cooking operation that requires a suppression system a Type 1 permit will be needed under N.J.A.C 5:18-2.7(a)3xii. Please see attached Appendix B for a list of all Permits and fees. Any question please reach out to the Fire Prevention Department.

**\*\*If an Operations or Special Activities Permit is not needed please check box below. (Please note upon inspection if the Fire Inspector/Official deems a permit(s) is needed you will be informed at the inspection.)\*\***

Operations or Special Activities Permits:  NOT APPLICABLE or  APPLICABLE

Business Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Email: \_\_\_\_\_

**Special Activity or Operations Permit #1:**

Permit Code Number: \_\_\_\_\_ Location of Permit: \_\_\_\_\_

Description: \_\_\_\_\_

**Special Activity or Operations Permit #2:**

Permit Code Number: \_\_\_\_\_ Location of Permit: \_\_\_\_\_

Description: \_\_\_\_\_

\*\*If more space is needed please photocopy this page and attached to application.

Please continue to next page, you're almost done! 😊

I hereby acknowledge that I have read this application, that the information given is correct, that I am the owner or duly authorized to act in the owner's behalf, and as such hereby agree to comply with the applicable requirements of the Uniform Fire Safety Code as well as any specific conditions imposed by the Fire Official.

**The Uniform Fire Code States:**

The owner of all businesses, occupancies, buildings, structures, or premises required to be inspected under Section 19A.12.1 shall apply annually to the Local Enforcing Agency for a Certificate of Registration upon forms provided by the Fire Official. It shall be a **VIOLATION** of this ordinance for any owner to fail to return such forms to the Local Enforcing Agency and/or Fire Official within thirty (30) days of receipt. 19A13.2

**Applicant's signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Applicant's printed name:** \_\_\_\_\_

**Name, email and number to call to set up Fire Inspection to complete CCO:**

\_\_\_\_\_  
\_\_\_\_\_

\*\*\*\*\*

**FOR OFFICE USE ONLY – DO NOT WRITE BELOW THIS LINE:**

**Fire Inspector Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

Approved or  Rejected – Reason: \_\_\_\_\_

**Board of Health Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

Approved or  Rejected – Reason: \_\_\_\_\_

**Zoning Officer Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

Approved or  Rejected – Reason: \_\_\_\_\_

## APPENDIX B

### SPECIAL ACTIVITIES AND OPERATIONS PERMITS INFORMATION PAGE

As per N.J.A.C. 5:18-2.7 and Oakland Borough Ordinance

#### Annual Fee Amount Permit Breakdown:

Type 1 Permit = \$100.00

Type 3 Permit = \$683.00

Type 2 Permit = \$342.00

Type 4 Permit = \$1025.00

#### Permit Requirement Breakdown by Permit Type:

##### Type 1 permit:

i. Bonfires;

ii. The use of a torch or flame-producing device to remove paint from, or seal membrane roofs on, any building or structure;

iii. The occasional use of any non-residential occupancy other than Use Groups F, H or S for group overnight stays of persons over 2 1/2 years of age, in accordance with section F-709.0 of the Fire Prevention Code;

iv. Individual portable kiosks or displays when erected in a covered mall for a period of less than 90 days, and when not covered by a Type 2 permit;

v. The use of any open flame or flame-producing device, in connection with any public gathering, for purposes of entertainment, amusement, or recreation;

vi. Welding or cutting operations except where the welding or cutting is performed in areas approved for welding by the fire official and is registered as a type B life hazard use;

vii. The possession or use of explosives or blasting agents, other than model rocketry engines regulated under N.J.A.C. 12:194;

viii. The use of any open flame or flame-producing device in connection with the training of non-fire service personnel in fire suppression or extinguishment procedures;

ix. The occasional use in any building of a multipurpose room, with a maximum permitted occupancy of 100 or more for amusement, entertainment or mercantile type purposes.

x. The storage or handling of class I flammable liquids in closed containers of aggregate amounts of more than 10 gallons, but not more than 660 gallons inside a building, or more than 60 gallons, but not more than 660 gallons outside a building.

xi. The storage or handling of class II or IIIA combustible liquids in closed containers of aggregate amounts of more than 25 gallons, but not more than 660 gallons inside a building, or more than 60 gallons, but not more than 660 gallons outside a building.

xii. Any permanent cooking operation that requires a suppression system in accordance with N.J.A.C. 5:70-4.7(g) and is not defined as a life hazard use in accordance with N.J.A.C. 5:70-2.4.

xiii. The use as a place of public assembly, for a total of not more than 15 days in a calendar year, of a building classified as a commercial farm building under the Uniform Construction Code.

xiv. The temporary use of any building or portion thereof as a special amusement building for a total of not more than 15 days in a calendar year.

(1) Use of a building or portion thereof as a special amusement building for a longer period shall require the issuance of a certificate of occupancy, pursuant to the Uniform Construction Code (N.J.A.C. 5:23), for the new use.

(2) Permits issued pursuant to this section shall require compliance with the requirements for special amusement buildings at N.J.A.C. 5:70-4.16.

xv. The erection, operation, or maintenance of any tent, tensioned membrane structure, or canopy, excluding those used for recreational camping purposes, that meets the criteria in (a) 3xv(1) or (2) below shall require a Type 1 permit. Tents, tensioned membrane structures, or canopies greater than 16,800 square feet in area or greater than 140 feet in any dimension, whether one unit or composed of multiple units; remaining in place for more than 180 days; used or occupied between December 1 and March 31; having a permanent anchoring system or foundation; or containing platforms or bleachers greater than 11 feet in height shall be subject to the permitting requirements of the Uniform Construction Code (N.J.A.C. 5:23-2.14).

(1) The tent, tensioned membrane structure, or canopy is greater than 900 square feet or more than 30 feet in any dimension whether it is one unit or composed of multiple units, but 16,800 square feet or less in area and 140 feet or less in any dimension, whether it is one unit or composed of multiple units.

(2) The tent, tensioned membrane structure, or canopy contains platforms or bleachers 11 feet or less in height;

xvi. The erection, operation, or maintenance of any outdoor combustible maze shall require a

Type 1 permit if the outdoor combustible maze is less than six feet in height and does not contain electrical equipment.

Outdoor combustible mazes that are six feet or greater in height or contain electrical equipment shall be subject to the permitting requirements of N.J.A.C. 5:23-2.14.

**(1)** For the purposes of applying this requirement, an outdoor combustible maze is an attraction that lacks a roof and is designed to disorient patrons, reduce vision, present barriers, or otherwise impede the flow of traffic and does not consist solely of living rooted plants such as corn stalks or trees, but includes mazes created from plants that have been cut and attached to an object to support them.

**(A)** Mazes consisting solely of living, rooted plants, such as corn stalks or trees, may be repaired using cut, replacement plants that are otherwise the same as those of which the maze is created without the need for a permit.

**(B)** No permit shall be required for mazes up to 42 inches in height created of bales of hay or straw.

**Type 2 permit:**

**i.** Bowling lane resurfacing and bowling pin refinishing involving the use and application of flammable liquids or materials;

**ii.** Fumigation or thermal insecticide fogging;

**iii.** Carnivals and circuses employing mobile enclosed structures used for human occupancy;

**iv.** The use of a covered mall in any of the following manners:

**(1)** Placing or constructing temporary kiosks, display booths, concession equipment or the like in more than 25 percent of the common area of the mall;

**(2)** Temporarily using the mall as a place of assembly;

**(3)** Using open flame or flame devices;

**(4)** Displaying liquid or gas fuel powered equipment; or

**(5)** Using liquefied petroleum gas, liquefied natural gas or compressed flammable gas in containers exceeding five pound capacity.

**v.** Storage outside of buildings of LP-gas cylinders when a part of a cylinder exchange program.

**Type 3 permit:**

**i.** Industrial processing ovens or furnaces operating at approximately atmospheric pressures and temperatures not exceeding 1,400 degrees Fahrenheit which are heated with oil or gas fuel or which contain flammable vapors from the product being processed;

**ii.** Wrecking yards, junk yards, outdoor used tire storage, waste material handling plants, and outside storage of forest products not otherwise classified; or

**iii.** The storage or discharging of fireworks.

**Type 4 permit:**

**i.** Storage or use at normal temperature and pressure of more than 2,000 cubic feet of flammable compressed gas or 6,000 cubic feet of nonflammable compressed gas;

**ii.** The production or sale of cryogenic liquids; the storage or use of more than 10 gallons of liquid oxygen, flammable cryogenic liquids or cryogenic oxidizers; or the storage of more than 500 gallons of nonflammable, non-toxic cryogenic liquids;

**iii.** The storage, handling, and processing of flammable, combustible, and unstable liquids in closed containers and portable tanks in aggregate amounts of more than 660 gallons;

**iv.** To store or handle (except medicines, beverages, foodstuffs, cosmetics, and other common consumer items, when packaged according to commonly accepted practices):

**(1)** More than 55 gallons of corrosive liquids;

**(2)** More than 500 pounds of oxidizing materials;

**(3)** More than 10 pounds of organic peroxides;

**(4)** More than 500 pounds of nitromethane;

**(5)** More than 1,000 pounds of ammonium nitrate;

**(6)** More than one microcurie of radium not contained in a sealed source;

**(7)** More than one millicurie of radium or other radiation material in a sealed source or sources;

**(8)** Any amount of radioactive material for which a specific license from the Nuclear Regulatory

Commission is required; or

**(9)** More than 10 pounds of flammable solids.

**v.** The melting, casting, heat treating, machining or grinding of more than 10 pounds of magnesium per working day.