



Hamilton Township Fire District 7

Bureau of Fire Prevention

200 Mercer St

Hamilton, N.J. 08690

609-890-6927 Office 609-587-9030 Fax

Request for Time Extension

N.J.A.C. 5:70-2.9(e)

The following information **MUST BE COMPLETED** in order to be **CONSIDERED**.

Applicant Name:			
Mail Address			
Telephone		Fax	
E-mail address		Block	Lot
Physical Address			

Property Owner (if different than above)

CAN NOT BE THE SAME AS THE BUSINESS ADDRESS UNLESS PROPERTY OWNER LIVES AT THE ADDRESS YEAR ROUND.

Name			
Address		Fax	
City	State	Zip	
Telephone	Fax	E-mail address	
Applicant Signature		Date of Request	

Date of Notice of Violation		Date for Compliance From Violation Notice	
Violations that have been corrected		Number of Violations remain to be corrected	
Reason for Time extension request			
NEW Date for completion (Compliance)			

Applicant Signature		Date of Request
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Notice- Filing of this application shall be deemed an admission that the notice of violation is factually and procedurally correct and that the violations do or did exist.

Date Received	Date Reviewed	Date Approved	Date Denied
Reason for Denial Attached	LHU Reg #	UCC use	UFC Code