



**CRANFORD FIRE DEPARTMENT**  
**BUREAU OF FIRE PREVENTION & RISK MANAGEMENT**  
7 SPRINGFIELD AVE, CRANFORD, NJ 07016  
PHONE: (908)709-7360  
FAX: (908) 276-6183  
WWW.CRANFORD.COM/FIRE

**Business Information Update/Registration Form**

Select: ☐ New Business Registration      ☐ Existing Business Information Update

Date: \_\_\_\_\_

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

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

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

Business Owner Address: \_\_\_\_\_

Business Phone #: \_\_\_\_\_

Business Owner Phone #: \_\_\_\_\_

Business Owner E-mail: \_\_\_\_\_

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

**Business/Building Emergency Contacts:** (Reachable after hours in case of emergency)

1) Name \_\_\_\_\_ Phone # \_\_\_\_\_

2) Name \_\_\_\_\_ Phone # \_\_\_\_\_

3) Name \_\_\_\_\_ Phone # \_\_\_\_\_

Building Owner: \_\_\_\_\_

Building Owner Address: \_\_\_\_\_

Building Owner Phone #: \_\_\_\_\_

**BUSINESS/BUILDING INFORMATION:**

Are Hazardous Materials Used or Stored on-site? ☐ YES\* ☐ NO      \*If yes, please provide details.

Is commercial cooking equipment used on-site? ☐ YES ☐ NO

Fire Service Key (Knox) Box: ☐ YES ☐ NO    If yes – are keys updated and functional? ☐ YES ☐ NO

Fire Detection (smoke/heat detection): ☐ YES ☐ NO    Sprinklers: ☐ YES ☐ NO

*Please mail or fax completed forms to the above address/fax number or e-mail to  
M-Marotta@CranfordNJ.org or M-Lubin@CranfordNJ.org*