

BOROUGH OF WHARTON BUREAU OF FIRE PREVENTION 10 ROBERT STREET WHARTON, NJ 07885 MAIN: 973-361-8444 / FAX: 973-361-5281

09/14

PERMIT APPLICATION - Welding or cutting operations.

DATE:			1 N CHECK OD M	
APPLICANT NAME:		PAYMENTE		ONEY ORDER ONLY
ADDRESS:			PHONE:	
WORK SITE LOCATI	ON:			
DATE AND TIMES OF	WORK:			
TYPE TO BE USED:	OXY-FUEL	ELECTRIC ARC	OTHER:	
FUEL GAS TYPE TO F	BE USED: (INCLUD	E NUMBER AND SIZE O	F CYLINDERS)	

I hereby acknowledge that I have read this application and that the information given is correct, and that I am the owner, or duly authorized to act in the owners behalf, and as such agree to comply with all applicable requirements of the N.J. Uniform Fire Code.

SIGNED:_____ TITLE: