



Fire Prevention Division

800 Main Street
Asbury Park, NJ 07712-5987
Ph. (732) 774-7400 Fax (732) 775-7681

REQUEST FOR TIME EXTENSION

REGISTRATION NUMBER: _____ ORIGINAL INSPECTION DATE: _____

BUSINESS NAME: _____

BUSINESS ADDRESS: _____

WORK WHICH HAS BEEN ABATED: _____

WORK THAT REMAINS: _____

REASON WHY EXTENSION IS NECESSARY: _____

AMOUNT OF TIME NEEDED: _____ EMAIL: _____

Pursuant to N.J.A.C. 5:70-2.10(d) 2., an application for extension of time shall be deemed to be an admission that the Notice of Violation is factually and procedurally correct and that the violations do or did exist.

The following information **MUST BE COMPLETED IN ORDER TO BE CONSIDERED** and the information **CAN NOT** be the same as the Business Address or phone number, **UNLESS** the owner lives at the address year round.

OWNER'S HOME ADDRESS: _____

OWNER'S HOME CITY, STATE, ZIP: _____

OWNER'S HOME PHONE NUMBER: _____

Date

Signature of Owner or Agent

For Official Asbury Park Fire Department Use Only

Your request for an extension of time to abate violation(s) at the above location is:

GRANTED: The new date by which compliance is ordered is: _____

DENIED: The time limit originally imposed remains in effect.

FAILURE TO CORRECT VIOLATIONS WITHIN THE TIME LIMITS SET WILL RESULT IN THE IMPOSITION OF PENALTIES AND POSSIBLY OTHER ENFORCEMENT PROCEEDINGS.

Date

Fire Official/Inspector Signature

Certification Number: _____