

**SMALL BUSINESS
OPERATING PERMIT APPLICATION**

BUSINESS NAME: _____

ADDRESS: _____

DESCRIPTION OF OPERATION(S): _____

NAME OF PERSON IN CHARGE: _____

DAYTIME PHONE NUMBER: _____ **EMERGENCY PHONE NUMBER:** _____

OWNER: _____ **PHONE NUMBER:** _____

SYSTEMS

FIRE EXTINGUISHERS _____	FIRE ALARMS _____
SPRINKLERS _____	FIXED FIRE SUPPRESSION _____
KITCHEN FIRE SUPPRESSION _____	FUSIBLE LINKS _____
EMERGENCY LIGHTING _____	EXITS MARKED _____
ELEVATOR _____	SPECIAL HAZARDS _____
OCCUPANCIES LOADS: _____	

HAZARDOUS MATERIALS

MATERIAL	CLASS	QUANTITY AND STORAGE
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

APPLICANT'S SIGNATURE: _____ **DATE:** _____

Application is hereby made to the Code Enforcement Officer for the issuance of an operating permit pursuant to the Municipal Codes and the New York State Property Maintenance Codes. The applicant agrees to comply with all applicable laws, ordinances and regulations. The applicant further agrees that any certified Code Enforcement Officer shall be permitted to enter upon any building, structure or premises for which an operating application has been filed, or permit has been issued.