Office of the Fire Marshal
Bureau of Fire Prevention

Runnemede Municipal Building
24 N. Black Horse Pike
Runnemede, NJ 08078
856-939-2817
Fax: 856-939-0981

Michael Kearney
Captain / Fire Official

Request for Time Extension

Registration Number: _____ **Original Inspection Date:** _____

Business Name: _____

Business Address: _____

Work that has been Abated: _____

_____

Work that remains _____

Reason why extension is necessary _____

_____

Date work will be completed _____

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 if factually and procedurally correct and that the violations do or did exist.

The following information MUST BE COMPLETED IN ORDER TO BE CONCIDERED 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 or Agent Home Street Address: _____

Owner or Agents Home City, State, and Zip Code: _____

Owner or Agents Home Phone Number: _____

_____	_____	_____
Name of Owner or Agent	Signature of Owner or Agent	Date

Your request for an extension of time to abate violations 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 forth will result in the imposition of penalties and possible other enforcement proceedings.

_____	_____	_____
Date	Fire Official/Inspector Signature	Certification Number