



**CITY OF NEWARK
DEPARTMENT OF PUBLIC SAFETY
DIVISION OF FIRE PREVENTION & LIVE SAFETY**



Department of Public Safety
Division of Fire
1010 18th Ave.
Newark NJ 07106
Tel: 973-733-7496

Rufus Jackson
Fire Chief

VENDOR PERMIT APPLICATION

EVENT NAME: _____

EVENT LOCATION: _____

STARTDATE: _____ END DATE: _____

APPLICANT' NAME: _____

APPLICANT'S ADDRESS: _____

EMAIL _____ PHONE: _____

WHAT WILL YOU USING AT THIS EVENT

LUNCH TRUCK ___ PUSH CART ___ TRAILER ___ TABLE ___ TENT ___ PROPANE ___
CHARCOAL ___ -GENERATOR ___

APPLICANT'S SIGNATURE: _____

FOR OFFICIAL USE ONLY

APPROVED () DENIED () DATE ISSUED: _____ SECTOR # _____

FEES: \$75/vary _____ RECEIPT NUMBER # _____

INSPECTOR NAME: _____

**PLEASE RETURN WITH A CERTIFIED CHECK OR MONEY ORDER ONLY)
ALL FIELDS ARE TO BE FILLED OUT / PLEASE PRINT CLEARLY**