

**TOWN OF DOVER**  
**BUREAU OF FIRE PREVENTION**  
37 N SUSSEX ST / P O BOX 389  
DOVER, NJ 07802-0389  
**MAIN: 973-366-3260 / FAX: 973-366-9033**

6/08

**PERMIT APPLICATION - Welding or cutting operations.**

DATE: \_\_\_\_\_ TYPE: 1 FEE: \$75.00

PAYMENT BY CHECK OR MONEY ORDER ONLY

APPLICANT NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ PHONE: \_\_\_\_\_

WORK SITE LOCATION: \_\_\_\_\_

DATE AND TIMES OF WORK: \_\_\_\_\_

TYPE TO BE USED: OXY-FUEL \_\_\_\_\_ ELECTRIC ARC \_\_\_\_\_ OTHER: \_\_\_\_\_

FUEL GAS TYPE TO BE USED: ( INCLUDE NUMBER AND SIZE OF CYLINDERS) \_\_\_\_\_

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**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:** \_\_\_\_\_