



City of Port Jervis
Bureau of Fire Prevention
 Robert Brady, Fire Inspector
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Hotel / Motel Operation Permit Application

In accordance with the Code of the City of Port Jervis and the New York State Fire Prevention and Building Code, an annual fire code annual operational permit is required to maintain or operate a Hotel / Motel.

Make Checks Payable – City of Port Jervis

Hotel / Motel Operational Permit - \$100.00

Applicant & Property Information	Business Name						
	Address			Suite	City	State	Zip Code
	Telephone		Work Telephone		Email Address		
	Property Owner or Mailing Address if different from above						
	Name or DBA						
	Address			Suite	City	State	Zip Code
	Telephone		Work Telephone				
Primary or Secondary Contact	Name						
	Contact Name						
	Address			City	State	Zip Code	
	Telephone		Mobile Telephone		Work Telephone		

The undersigned represents that this application for a permit as described herein will be in accordance with all ordinances of the City of Port Jervis and the Fire and Building Code of New York State and that any plans or specifications submitted with this application are the plans or specifications relating to this permit and no other.

Each applicant for a license under this chapter shall make a written application setting forth:

- ❖ The name, residence and postal address of the applicant and the name under which the applicant intends to do business, if different.
- ❖ The exact location of the proposed licensed premises.
- ❖ A description of the building, structures and accommodations that comprise the licensed premises.
- ❖ A statement of the number of lawful housing or lodging units at said hotel or motel and the maximum number of persons that can lawfully be accommodated in the licensed premises and each individual unit thereof at any given time.
- ❖ The number and location of the automobile parking spaces and facilities at the licensed premises.
- ❖ The name and address of the owner of the licensed premises.
- ❖ The name or names of the person or persons on the licensed premises upon whom process may be served.

Applicant Signature			Applicant Name (Print)			Application Date
Permit Number	Issue Date	Expiration Date	Fee Paid	Check #	Receipt Number	Evacuation Plan Received