



Town of Southampton
Division of Fire Prevention

18 Jackson Avenue
Hampton Bays, NY 11946-2021
Telephone: 631- 728-2919
Fax: 631- 728-3688

John J. Rankin
Chief Fire Marshal

20 **Place of Worship/Museum Operating Renewal Form**

I, _____ as officer of _____
(Please Print Worship/Museum name)

located at _____,
(Please Print Worship/Museum address)

certify that the information provided on my original permit application for this establishment has not changed. I am requesting that the permit issued by the Southampton Town Division of Fire Prevention for this establishment be renewed in compliance with Southampton Town Code regulations.

Worship/Museum Phone: _____ **Fax Number:** _____

Worship/Museum E-mail: _____

1st Emergency contact person: _____

Phone number: _____ **E-mail:** _____

2nd Emergency contact person: _____

Phone number: _____ **E-mail:** _____

Date of Application: _____

The accuracy of the information, plans, diagrams and other facts submitted in conjunction with the application are the responsibility of the applicant. Any false statement made herein is punishable as a misdemeanor, pursuant to Section 210.45 of the New York State Penal Law.

Signature of Applicant _____ **Date:** _____

**** OFFICE USE ONLY ****

Tax Map # _____

Chief Fire Marshal _____ Date _____

Permit# _____ () Approved () Denied/Reason _____