STATE OF NEW JERSEY DEPARTMENT OF COMMUNITY AFFAIRS DIVISION OF CODES AND STANDARDS PO BOX 816 TRENTON, NEW JERSEY 08625 TELEPHONE NUMBER: 609-292-2097

APPLICATION FOR SKI LIFT REGISTRATION

(Please Type or Print all information)		DATE:	
Name of Owner:			
Address:			
Street or Box No.	City	State	Zip Code
Trade Name:			
Location:			
Phone:			
(Signature – Authorized Representative)		Title	

(Signature - Authorized Representative)

As required by Rules on Ski Lifts, N.J.A.C. 5:12-3.4, an inspection fee for registration shall be charged at the rate of \$150.00 per passenger tramway per year. A duplicate registration may be obtained at the rate of \$20.00 for each registration. The fee for plan review is \$250.00 per passenger tramway.

A CHECK IN FULL AMOUNT FOR REGISTRATION FEES MUST ACCOMPANY THIS APPLICATION

NAME OF EQUIPMENT	IDENTIFICATION (TYPE OF OPERATION)	REGISTRATION NUMBER
(OFFICIAL USE ONLY)	То	tal Permit Fee:
		eck No.
	Re	cord No.
	Da	te Entered

DATE INSURANCE EXPIRED