




SUPPLEMENTAL PERMIT TENT / CANOPY

02

*Staff: This form is a supplement to the Application.
For event date, contact information and other event details, please refer to the Application.
All Applicants who have tents or canopies at their event, **must** receive the "Outdoor Carnivals & Fairs" Packet Handout.*

Tent (With Walls): Over 400 square feet =Tent Permit Required (See DES)
Tent (With No Walls): Over 700 square feet =Tent Permit Required (See DES)
Multiple Tents Attached Together: Over 700 square feet Combined =Tent Permit Required (See DES)

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|--|------------------------------------|---------------------------------|--------------------------------------|
|  | Date Tents/Canopies to be Erected: | Date Tents/Canopies to be Down: | Date & Time of Requested Inspection: |
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INSTRUCTIONS: Answer each question by filling in the blanks or checking the appropriate box.
 This page is to be submitted to staff, who will then route it to the Fire Department.
 The Fire Department will then schedule the inspection with the applicant.

Form Updated 8/2/11

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|----------------------------|--|
| Event Map Site Plan | Requires an Event Map (#10); plus the "Outdoor Carnival & Fairs" Requirements Packet Handout |
| | <ul style="list-style-type: none"> All events with Tents, Canopies, or Booths require a completed "Event Map" (Supplemental #10) prior to City Review of Application. All events with Tents, Canopies, Booths or Vendors must also receive the "Outdoor Carnivals & Fairs" Requirements Packet Handout. |

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| Potentially Hazardous Materials or Elements | Does this event utilize these Materials or Elements? | | | <i>All of these material or elements must be listed on the Event Map, along with all Tents/Canopies, and All event activities.</i> |
| | Propane (Use: _____) <input type="checkbox"/> Yes <input type="checkbox"/> No Gasoline (Use: _____) <input type="checkbox"/> Yes <input type="checkbox"/> No Kerosene (Use: _____) <input type="checkbox"/> Yes <input type="checkbox"/> No | Electricity (Use: _____) <input type="checkbox"/> Yes <input type="checkbox"/> No Open Flame (Use: _____) <input type="checkbox"/> Yes <input type="checkbox"/> No Hot Grease/Fat (Use: _____) <input type="checkbox"/> Yes <input type="checkbox"/> No | | |

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|---|--|------------|-------------|------------|--|------------|-------------|------------|-------------|
| Tent/Canopy Information | "Tent" = 2 or more Walls (Greater Than 25% of Perimeter) | | | | "Canopy" = 1 or No Walls (Less Than or Equal To 25% of Perimeter) | | | | |
| | Type | Qty | Size | Qty | Size | Qty | Size | Qty | Size |
| | TENTS: | () | X | () | X | () | X | () | X |
| | CANOPIES: | () | X | () | X | () | X | () | X |
| Tent/Canopy Supplier Information: Company Name: _____ Office Contact: _____ Mailing Address: _____ City/State: _____ Zip: _____ Phone: _____ Fax: _____ Email: _____ On-Site Contact Person: _____ Cell #: _____ | | | | | | | | | |

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|---------------------|---|--|---|---|
| Internal Use | Triggers for this Supplemental: [T] | Additionally Required Supplementals: #10 Event Map / Site Map "Outdoor Carnivals & Fairs" Handout | Potentially Required Supplementals: #03 Stage #04 Generator/Elect. #11 NTPO #05 Business License | Must be Routed to: FD / PW / PD |
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