

Woodside Fire Protection District Bureau of Prevention and Life Safety

Fire Operational PermitTENT / MEMBRANE STRUCTURE

This Permit Shall Be Kept on Premises During the Entire Event

PERMIT INFORMATION

T A COMMITTER OF THE PROPERTY	1011	 	
Location:			
Address:		City:	Zip:
Type of Property:			
Date of Event:	Date of Installation:		Date of Removal:
APPLICANT INFORM	MATION:		
Name:	Ema	il:	
Type of Applicant:			
Applicant Address:		City:	Zip:
Cell Number:			
APPLICATION DET	AILS:		
Event Name:	Event Type:		
Number of Tents:	Tent Sizes:		
Number of Guests:	Heating Appliances: yes	/ no	Cooking Tent: yes / no
Type of Seating: Standing	/ Theatre Type Seating /	Table and Cha	airs / Other:
	FOR FIRE DEPART	MENT USE ONI	<u> </u>
Final Inspection Result	Date:		Inspector:
This paymit is issued and a	ccepted on conditions that al	I regulations sl	hall romain in compliance
Submit to: wfpdplanreview(_	i regululions si	чии гетин ін сотриинсе.
Swaller to Typupuli every	o, roomstacja ciorg		
Attach: Site and floor plan	of tents or membranes includ	ing Location of	Tents on the Property, Seating Capacity,
_		-	ectrical equipment, Stages, Exits, Fire
_	oking or Heating Appliances, No	o smoking signs,	, Occupancy Load sign
•	n of structural stability.	ta propositi	District
	.83 link: Fee Schedule - Woods	ide Fire Protection	on District
	flammability certificates.		
☐ Certificate of Liab	iity of insurance		

Date Paid:	