

FRANKLIN TOWNSHIP FIRE PREVENTION DEPARTMENT
APPLICATION FOR TYPE 16 SPECIAL EVENT FIRE PERMIT

EVENT LOCATION

NAME OF FACILITY _____ CONTACT PERSON _____
ADDRESS _____
TELEPHONE _____ ROOMS/AREAS TO BE USED _____

EVENT PROFILE

NAME OF EVENT _____
DESCRIPTION OF EVENT ACTIVITIES _____

EVENT WILL BE: OPEN TO THE PUBLIC BY INVITATION ONLY

EVENT DATES _____ HOURS _____

EVENT SETUP START DATE _____ EVENT PEAK ESTIMATED ATTENDANCE INCLUDING STAFF & VENDORS _____

EVENT HISTORY: PROVIDE DATES, FACILITIES, ADDRESSES, CONTACT PERSONS AND TELEPHONES FOR LAST TWO SCHEDULED EVENTS.

EVENT SPONSORING ORGANIZATION _____

ADDRESS _____

CONTACT PERSON _____ TELEPHONE _____

WILL THE FIRE OFFICIAL RECEIVE THIS APPLICATION AT LEAST 21 DAYS PRIOR OT THE EVENT SETUP? _____

ARE THREE (3) COPIES OF REQUIRED DETAILED, SCALED DRAWINGS ATTACHED TO THIS APPLICATION? _____

IS PAYMENT OF THE REQUIRED \$150.00 APPLICATION FEE PAYABLE TO "FRANKLIN TOWNSHIP" ATTACHED? _____

I, the undersigned certify that I have read this application and the information given is correct. I hereby agree to comply with the applicable provisions of the Fire Code as well as to any specific conditions which may be imposed by the fire official. I also understand that penalties will be issued against me if I do not obtain a permit prior to the commencement of this event, or if I or my agents violate the Fire Code or any conditions imposed by the fire official.

APPLICANT NAME (PRINT) _____ TITLE _____

APPLICANT SIGNATURE _____ DATE _____

IMPORTANT! *This completed application together with the required scaled drawings and application fee must be received at the office of fire prevention no less than 21 calendar days prior to setup for the event.*

FOR OFFICE USE ONLY.....

DATE RECEIVED _____ AMOUNT PAID _____ RECEIPT NO. _____ 3 DRAWINGS ATTACHED: YES NO

REVIEWED BY _____ DATE _____ PERMIT NO. _____

APPROVED: CONDITIONS _____

REJECTED: REASONS _____