APPLICATION FOR TEMPORARY PERMIT
FOR TEMPORARY FACILITY/TENT/STAGE

Starts: _____
End: _____
Set Up Date: _____

AGENCY: _____
TENT/FACILITY OWNER: _____
LOCATION: _____
NAME OF NEAREST BUILDING: _____
Distance to Nearest Building Wall: N _____ ft. S _____ ft. E _____ ft. W _____ ft. (VUSBC 705.2)
TENT DATA:
Tent Type: Open Sides □ With Sidewalls (closed) □ Fabric: Noncombustible □ Conforms to NFPA 70 □
Tent Serial _____ Certificate of Flame Resistance # _____ (VUSBC 3104.6)
Function/Activity: _____
Use Group: _____ Total Area: _____ sf Maximum Occupancy: _____ persons

STRUCTURE DATA: Description _____
Closed Engineering System Provided/Manufactured by: _____
or
Site Specific Design By: _____
Type of Construction: _____ 2C _____ 5B Other: _____
Floor Live Load: _____ psf Roof Live Load: _____ psf Design Wind Speed: _____ mph
Function/Activity: _____
Use Group: _____ Total Area: _____ sf Maximum Occupancy: _____ persons

User Responsible Person: _____ Phone: _____
Agency Contact Person: _____ Phone: _____