

APPLICATION FOR PLAN REVIEW AND PERMITTING

To submit plans or schedule inspections, please email fireprevention@fffd.us

Type of Plan Review: Special Event: Tent	: Inflatable Struct	ure: Permi	t: #
Date: Event Name:			
Event Contact:	Phone:		
Event Address:	City/Zip:		County:
Vendor/Operator:			
Mailing Address:	City:	State:	Zip:
Telephone: Fax:	Email Address:		
Site Contact:	Phone:		
By submitting this Application, the applicant affirm and that the applicant has full authority to submit the contractor, architect, subcontractors and their empliere Code, Building Code, Mechanical Code and any the Fire District for all fees (including attorneys' fee contractor, architect, subcontractors and their empliere Code, Building Code, Mechanical Code and any	his application. The appli loyees, agents and represe y other applicable Codes of es) costs and expenses it m loyees, agents and represe y other applicable Codes of	cant affirms and a intatives, will comp or standards. The ay incur as a resul intatives, to comply or Standards.	agrees that the owner, bly with all requirements of the e applicant agrees to reimburse t of a failure of the owner, w with all requirements of the
Please include with this permit application a site pla inflatable structures; a copy of the current Liability the event listed on the Liability Insurance Policy; the	Insurance Policy in the m	ninimum amount o	f \$1,000,000.00 dollars with
The Event Plan/Site Inspection fee set forth above is application for an event permit, and where appropri of \$100.00. Additional reviews of re-submitted or rerate of \$100.00 an hour, with a minimum fee of \$100.00 and \$100.	iate a site inspection. All p vised plans and /or addition	permits will be asso	essed with an initial review fee
Applicant Name and Title: Printed I	Name/Signature	Da	ite: