Town of Ridgefield

FIRE DEPARTMENT

6 Catoonah Street
Ridgefield, CT 06877
Office: (203) 431-2726
Fax: (203) 431-2562
www.ridgefieldct.org

Application for Tent Permit

Tent Applicant

Today's Date: _____/_____/_____

Name of Person Applying for Permit: _____

Address Where Tent(s) will be Installed: _____

Applicant's Contact Numbers: Cell Phone: ( ) _____-_____

Home/Business: ( ) _____-_____

Tent Contractor

Contractor Name: _____

Contractor Address: _____

Tent Information:

Number of Tent(s): _____ Tent Size(s): _____ Electricity: YES / NO

Sides on the Tent(s): YES / NO Fire Rating: _____ Heating: YES / NO

Date Tent(s) will be Installed: _____/_____/_____
Date Tent(s) will be Used: _____/_____/_____

Anticipated Number of Persons to Occupy the Tent(s): _____

I hereby certify that I am the owner of record of the above property, or that the proposed work is authorized by the owner, and that I have been authorized to make this application as the designated agent and I agree to conform to all applicable laws of this jurisdiction. In addition, if a permit for work is issued, I certify that the code official or the code official's authorized representative shall have the authority to enter areas covered by such permit at any reasonable hour to enforce the provisions of the code(s) applicable to such permit.

_____ _____/_____/_____ _____ _____/_____/_____
Owner/Agent Signature Date Contractor Signature Date

_____ _____/_____/_____
Fire Marshal Approval Date

Updated 05/01/2013