

BRIGHTON AREA FIRE DEPARTMENT

EVENT FIRE CODE PERMIT APPLICATION

Event name/type: _____

Location: _____

Date(s) of event: _____ Start time: _____ End Time: _____

Owner/Occupant Name: _____

Address: _____

Telephone: _____

Tent Installer Name: _____

Address: _____

Telephone: _____

Event Coordinator Name: _____

Address: _____

Telephone: _____

Size of tent/canopy: _____ Number in attendance: _____

Entertainment Type: _____ Dance floor: _____

Stage/platform: _____ Special effects: _____

Cooking in Tent or Canopy? YES NO Source of heat: _____

Source of power: _____

Cooking in Special Transitory Food Unit? YES NO

Does your cooking operation produce grease-laden vapors? (grills/fryers) YES NO

Source of heat: _____ Source of power: _____