

**TOWN OF DOVER**  
**BUREAU OF FIRE PREVENTION**  
**37 N SUSSEX ST**  
**DOVER, NJ 07801**  
**MAIN: 973-366-3260 / FAX: 973-366-9033**

6/08

**PERMIT APPLICATION - Tents and temporary tensioned membrane structures**

DATE: \_\_\_\_\_ TYPE: 1 FEE: \$60.00  
PAYMENT BY CHECK OR MONEY ORDER ONLY

APPLICANT: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

PHONE NO.: BUSINESS: \_\_\_\_\_ HOME: \_\_\_\_\_

REASON/PURPOSE FOR TENT: \_\_\_\_\_

LOCATION FOR TENT: \_\_\_\_\_

TENT PROVIDER NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CONTACT PERSON: \_\_\_\_\_

TENT (S) DIMENSIONS: \_\_\_\_\_

TYPE: OPEN SIDES -- \_\_\_\_\_ CLOSED SIDES -- \_\_\_\_\_

USE DATES AND TIMES: \_\_\_\_\_

SET UP DATE AND TIME: \_\_\_\_\_

**APPLICANT MUST PROVIDE THE FOLLOWING WITH THIS APPLICATION:**

1. SITE PLAN OF THE PROPERTY SHOWING THE TENT AND DISTANCES FROM PROPERTY LINES, BUILDINGS ETC. TO SCALE.
2. DIAGRAM WITH THE SEATING ARRANGEMENT, EXIT LOCATIONS, EXPECTED OCCUPANT LOAD, FIRE EXTINGUISHERS.
3. COPY OF FLAME RESISTANCE RATING CERTIFICATE FOR EACH SECTION OF TENT OR STRUCTURE.
4. ANY TEMPORARY ELECTRICAL SUPPLIES MAY REQUIRE A BUILDING DEPARTMENT ELECTRICAL PERMIT AND INSPECTION (973-366-3260).
5. INDICATE IF ANY COOKING/OPEN FLAME OR TEMPORARY HEATING DEVICES WILL BE USED. PROVIDE DETAILED INFORMATION AS TO TYPE, FUEL, ETC.

**SUBMIT APPLICATION AT LEAST 14 DAYS PRIOR TO THE EVENT TO ALLOW TIME FOR REVIEW AND PROCESSING.**

I hereby acknowledge that I have read this application and that the information given is correct, and that I am the owner, or duly authorized to act in the owners behalf, and as such agree to comply with all applicable requirements of the N.J. Uniform Fire Code.

SIGNED: \_\_\_\_\_ TITLE: \_\_\_\_\_