Town of Putney Fire Department
Fire Prevention Division

Tent Permit Application

Section A; Tent Site Location

Building or Site Name: _____

Physical Location: _____
(9-1-1 Address)

Property Owner Name: _____

Property Owner Address: _____

Property Owner Contact: Home ( ) _____
Work ( ) _____
E-mail

Section B; Tent Vendor Information

Name: _____

Address: _____

_____

Phone: ( ) E-mail:

Section C; Occupancy / Use of Tent

Type of Event: _____

Date(s) of Event / Tent Use: _____

_____

Date Tent to be Erected:

Section D; Applicant Information

Applicant Name: _____

Contact Person: _____ Position: _____

Address: _____

_____

Phone: ( ) E-mail:

Section E; Tent Information	
Tent Square Footage _____	Number of Exits _____
Tent Occupied In Hours of Darkness ____ Yes ____ No	Tent Fabric Fire Resistant ____ Yes ____ No
Year Tent Manufactured _____	Distance from Nearest Building _____
20' Fire Lane Maintained ____ Yes ____ No	Fire Extinguishers ____ Yes ____ No
Exit Signs & Emergency Lights ____ Yes ____ No	Electrical Power Provided ____ Yes ____ No
Heating Appliances ____ Yes ____ No	If Yes, Fuel Type & Location _____
Cooking Appliances ____ Yes ____ No	If Yes, Fuel Type & Location _____
Arrangement of Seating ____ Chairs ____ Tables & Chairs ____ Bleachers ____ None	

Section F; Permit Fee Calculation	Make check payable to *Town of Putney* and include with this form	
Gross Square Footage of Tent _____	X **0.125** =	$
Heating / Cooking Appliance(s) Inspection	$50.00 flat fee	$
	Total Fee	$

Property Owner / Applicant Signature: _____

Date of Application: _____

Office Use Only*

Site #	Date Received:	Approval Date:
Amount Due:	Amount Rec'd:	Check #:
Check From:		Permit #:

Please return form and payment to:

Putney Fire Department
14 Main Street; PO Box 875
Putney, Vermont 05346