



# PERRYSBURG TOWNSHIP FIRE & EMS

## BUREAU OF FIRE PREVENTION

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### TENT & MEMBRANE STRUCTURES PERMIT APPLICATION

Permit Application For: \_\_\_ Tent in excess of 400 sqft \_\_\_ Membrane Structure \_\_\_ Other

| Applicant Information                                              |             | Location                                      |             |
|--------------------------------------------------------------------|-------------|-----------------------------------------------|-------------|
| Applicant Name:                                                    |             | Facility Name:                                |             |
| Address:                                                           |             | Address:                                      |             |
| City:                                                              | State: Zip: | City:                                         | State: Zip: |
| Contact:                                                           |             | Contact:                                      |             |
| Phone Number: ( ) -                                                |             | Phone Number: ( ) -                           |             |
| Email:                                                             |             | Email:                                        |             |
| Installer                                                          |             | Date of Event:                                |             |
| Company:                                                           |             | Purpose of Tents:                             |             |
| Address:                                                           |             | Will there be cooking in or near tents? _____ |             |
| City:                                                              | State: Zip: | Will there be electricity? _____              |             |
| Contact:                                                           |             | Will there be heating? _____                  |             |
| Phone Number: ( ) -                                                |             | Will there be Air Conditioning/Fans _____     |             |
| STRUCTURE #1                                                       |             | STRUCTURE #2                                  |             |
| Date of Manufacture: _____                                         |             | Date of Manufacture: _____                    |             |
| Serial Number: _____                                               |             | Serial Number: _____                          |             |
| Size: _____ x _____                                                |             | Size: _____ x _____                           |             |
| Last Treatment Date: _____                                         |             | Last Treatment Date: _____                    |             |
| Date to be Erected: _____                                          |             | Date to be Erected: _____                     |             |
| Date to be Taken Down: _____                                       |             | Date to be Taken Down: _____                  |             |
| Attach additional sheets if you will have more than two structures |             |                                               |             |
| Number of Tents to be erected:                                     |             | \$0.00 Per Tent                               | \$0.00      |
| Number of Membrane Structures                                      |             | \$0.00 Per Membrane Structure                 | \$0.00      |

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

### Fire Prevention Use Only Below This Line

|                  |                        |
|------------------|------------------------|
| Date Received:   | Plan Review Completed: |
| Inspection Date: | Inspector:             |
| Permit Number:   |                        |

After final inspection and approval of the installation per plans, sign, and return with inspection report

Inspector Signature: \_\_\_\_\_ Date: \_\_\_\_\_

O.A.C 1301:7-7-31

2017 OFC Rule 31