

DELRAY BEACH FIRE DEPARTMENT
Application Information for Tent Installation
PER NFPA 1, U.F.C FLORIDA 2005 EDITION

PLAN CHECK NO. _____ CONTRACTOR: _____

SITE ADDRESS: _____

PROPERTY OWNER: _____

CIRCLE THE CORRECT ANSWER TO THE FOLLOWING QUESTIONS:

1. Provide flame resistance test certificate? Y N
2. A) Provide Site Plan? **or** Y N
B) Provide description of location Y N
3. Number of tents? _____
4. **Use of tent(s):** _____
5. Number of people the tent is to serve: _____
6. Tent will have side flaps? Y N
If yes, A) Provide for proper exiting? Y N
B) Occupancy 100+, provide exit signs? Y N
7. Tent will have cooking within? Y N
If yes, A) Describe fuel source: _____
B) Safety measures: _____
8. Tent will be occupied after dark? Y N
If Yes, A) Provide artificial light? Y N
(Electrical Permit Required)
B) Occupancy of 100+, Emergency lights? Y N
9. Area 10-Ft around tent will be clear of combustible & flammable material and/or vegetation? Y N
10. "No Smoking" signs provided? (if it has side flaps)? Y N
11. A) 5 lb ABC Fire Extinguisher provided? (with Tag) **or** Y N
B) Provide a functioning garden hose? Y N

NAME: _____ SIGNATURE: _____
(PRINT)

CELL PHONE NUMBER: () _____ OTHER PHONE No: () _____