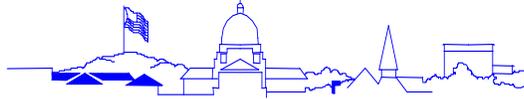


CITY OF ALTOONA



ALTOONA FIRE DEPARTMENT

FIRE ADMINISTRATION
1319 WASHINGTON AVE.
ALTOONA, PA. 16601-3139
TEL. (814) 949-2230
FAX: (814) 949-2245

ADAM C. FREE
FIRE INSPECTOR
1319 WASHINGTON AVE
ALTOONA, PA 16601
TEL. (814) 949-3398

Tent/Temporary Membrane Structure Permit Application

(FOR INSTALLATION AND USAGE OF TENT EXCEEDING 400 SQ. FT.)

FEE: \$50.00

APPLICATION DATE: _____

PLACEMENT DATES: _____ TO _____

APPLICANT NAME: _____

APPLICANT ADDRESS: _____

APPLICANT PHONE: _____

PROPERTY LOCATION: _____

PROPERTY OWNER NAME: _____

PROPERTY OWNER ADDRESS: _____

PROPERTY OWNER PHONE: _____

TENT INSTALLER: _____

INSTALLER ADDRESS: _____

INSTALLER PHONE: _____

This application/permit is in accordance with the 2012 International Fire Code, Chapter 31 and the fees adopted by Resolution 0087-18.

Conditional Permit will be issued upon completion of application. Final Permit will be issued upon successfully passing a Fire and Life Safety once the tent is installed. To schedule inspection, contact the Fire Inspectors Office at 814-949-3398

I hereby acknowledge that I have read this application, that the information given is correct and that I am the owner or authorized agent to act on the owner's behalf and as such, agree to comply with the applicable requirements of the International Fire Code. It is further understood that this permit is only for the dates specified above.

Applicant Signature

Date

City of Altoona Issuing Agent

Date

PLACEMENT OF TENT

(On reverse side please provide a detailed drawing of location of tent in relation to streets and buildings)