



TENT/TEMPORARY MEMBRANE STRUCTURE PERMIT APPLICATION (FOR INSTALLATION AND USAGE OF TENT EXCEEDING 400 SQ. FEET)

FIRE ADMINISTRATION
1319 WASHINGTON AVENUE
ALTOONA, PA, 16601-3139
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JUSTIN SMITHMYER
ACTING FIRE INSPECTOR
1319 WASHINGTON AVENUE
ALTOONA, PA 16601-3139
(814) 949-3398

This permit will be issued in accordance with the International Fire Code 2018 edition, Section 105.6.47, Section 105.7.25 both entitled Temporary membrane structures and tents, and Chapter 31 as adopted by City Ordinance # 5788 on April 11, 2022. As well as Fee Resolution 0130-21.

APPLICATION DATE: _____ PLACEMENT DATE: _____ TO _____

APPLICANT INFORMATION

NAME:		PHONE:	
ADDRESS:	CITY:	STATE:	ZIP CODE:

PROPERTY INFORMATION

ADDRESS:	CITY:	STATE:	ZIP CODE:
OWNER NAME:		PHONE:	
PROPERTY OWNER ADDRESS:	CITY:	STATE:	ZIP CODE:

TENT INSTALLER INFORMATION

TENT INSTALLER NAME:		PHONE:	
ADDRESS:	CITY:	STATE:	ZIP CODE:

PLEASE PROVIDE A DETAILED DRAWING OF THE LOCATION OF THE TENT IN RELATION TO STREETS AND BUILDINGS ON THE REVERSE SIDE OF THIS FORM.

APPLICANTS SIGNATURE

A CONDITIONAL PERMIT WILL BE ISSUED UPON COMPLETION OF THIS APPLICATION.

A FINAL PERMIT WILL BE ISSUED UPON PASSING A FIRE AND SAFETY INSPECTION ONCE THE TENT IS INSTALLED AND PAYMENT OF THE PERMIT FEE (LISTED ABOVE) IS RECEIVED AT THE CITY OF ALTOONA FINANCE OFFICE LOCATED IN CITY HALL – 1301 12TH STREET SUITE 104 ALTOONA PA 16601.

TO SCHEDULE THE FINAL INSPECTION, CONTACT THE FIRE INSPECTOR’S OFFICE AT 814-949-3398.

I HEREBY ACKNOWLEDGE THAT I HAVE READ THIS APPLICATION, THAT THE INFORMATION 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