

TOWN OF BRIDGEWATER - TENT PERMIT APPLICATION

JOB LOCATION _____

PERMIT # _____

PROPERTY OWNER

Name _____
Mailing _____
Address _____

Email _____
Phone _____

APPLICANT (if not property owner)

Name _____
Mailing _____
Address _____

Email _____
Phone _____

BUILDER/CONTRACTOR INFORMATION

Name _____
Mailing _____
Address _____

Email _____

LICENSE or REGISTRATION

Class _____
Number _____
Expiration Date _____
Phone _____

******* TENTS *******

NUMBER OF TENTS

SIZES

INSTALLATION DATE

REMOVAL DATE

CERTIFICATES OF FLAMMABILITY MUST BE ATTACHED

ROUGH SITE PLAN SHOWING LOCATION OF TENT(S) TO OTHER STRUCTURES MUST BE ATTACHED

SEPARATE PERMITS MUST BE PULLED IF THERE IS ELECTRICITY

******* PERMIT APPROVAL IS REQUIRED BEFORE ANY WORK BEGINS *******

FEE: \$25 PER TENT \$ _____

I CERTIFY THAT I AM THE OWNER OR AUTHORIZED AGENT FOR THE OWNER. ALL WORK COVERED BY THIS APPLICATION HAS BEEN AUTHORIZED BY THE OWNER OF THE ABOVE DESCRIBED PROPERTY AND WILL BE PERFORMED ACCORDING TO THE CONNECTICUT STATE BUILDING CODE. AS THE APPLICANT, I UNDERSTAND THAT A FINAL INSPECTION AND A CERTIFICATE OF USE OR OCCUPANCY IS REQUIRED.

APPLICANT SIGNATURE _____

DATE _____

******* BUILDING DEPT. USE ONLY *******

REQUIREMENTS

☐ Proof W.C. ☐ Site Plan ☐ Flammability Certificates

JOB LOCATION

Map _____ Block _____ Lot _____ Unit _____

PAYMENT

Check # _____ Amount \$ _____ Paid By _____

APPROVED BY FIRE MARSHALL _____

DATE _____

APPROVED BY BUILDING OFFICIAL _____

DATE _____