



Nassau County Fire Commission

Office of the Fire Marshal

1194 Prospect Avenue

Westbury, N.Y. 11590

(516) 573-9900

nassaucountyny.gov/firemarshal

Tent Permit Application

This application shall be submitted at least three business days prior to installation. A copy of this application and all associated paperwork as well as the issued permit shall be maintained on-site and attached to the tent.

Tents that are connected or within 10 feet of one another shall be considered contiguous. A separate application and payment shall accompany each separate tent.

Fees for tents larger than 200 sq. ft. with sidewalls on more than 25% of the perimeter shall be \$60. Fees for tents larger than 400 sq. ft. shall be \$110. Fees for cooking tents shall be \$150.

Event Address (Number/Street/Description):		
City:	State:	Zip Code:
Business/Tenant/Resident Name:		
Size of Tent Section(s):		
Size #1 _____ x _____ Sq. Ft. - _____	Size #4 _____ x _____ Sq. Ft. - _____	
Size #2 _____ x _____ Sq. Ft. - _____	Size #5 _____ x _____ Sq. Ft. - _____	
Size #3 _____ x _____ Sq. Ft. - _____	Size #6 _____ x _____ Sq. Ft. - _____	
Portable generator to be used: <input type="checkbox"/> YES <input type="checkbox"/> NO	Electrical power to be provided: <input type="checkbox"/> YES <input type="checkbox"/> NO	Cooking be done under tent:** <input type="checkbox"/> YES <input type="checkbox"/> NO
Heater units to be used: <input type="checkbox"/> YES <input type="checkbox"/> NO	Propane used/stored on site as part of event for use within or adjacent to tent: <input type="checkbox"/> YES <input type="checkbox"/> NO	**NOTE: Tents that have cooking done underneath are designated as cooking tents and have strict separation requirements from other tents, as well as other regulations under County Ordinance and State Codes.

NOTE: If propane (LPG) to be used, NCFM Report of Liquefied Petroleum Gas Installation must be filed with this application.

Installer Name:	
Installer Address:	
Contact Person:	Phone:
Contact Person's e-mail, cell phone, and/or fax #	
E-mail:	Cell # Fax #

Date of installation:	Anticipated time of installation: <input type="checkbox"/> AM <input type="checkbox"/> PM
Dates to be used:	Planned Hours of Use:
Description - Use of Tent(s):	

APPLICATION FOR TENT PERMIT – NASSAU COUNTY FIRE MARSHAL (PAGE 2 OF 2)

Check or mark all items that describe the event as it relates to this application.

- Special Event (Carnival, Fair, Circus, Crafts Festival, etc.)
- Event/Use associated with this application has been reported to local Fire Department
- Event/Use associated with this application has or needs another permit issued by a Township or Village
- Event/Use by a commercial business interest – including but not limited to a restaurant, bar, mall or other store
- Used for an event involving fixed seating (chairs or benches) inside of tent(s) and/or canopy
- Event/Use expected to meet or exceed fifty (50) people. **Provide detailed seating chart.**
- Event/Use associated with this application for permit is scheduled for over 30 days
- Event/Use associated with this application for permit is scheduled for 8 to 30 days
- Event/Use associated with this application for permit is scheduled for less than 8 days
- Event/Use associated with this application for permit is scheduled for **less than 48 hours**
- Event/Use associated with this application involves an area that includes a tent installation in a parking area
- Some tents included under this application are sized 1,000 sq. ft. or more

FLAME PROOFING CERTIFICATES ARE REQUIRED TO BE SUBMITTED FOR EACH TENT, SIDEWALL AND CANVAS SECTION COVERED BY THIS APPLICATION

AFFIDAVIT

I, _____ [print name], being duly sworn upon oath, state that I identified the criteria that applies to the tent(s) being erected. I further attest that I am the owner or authorized by the owner to erect the tent(s) at the address listed on this Application. I understand that the erection of this tent shall comply with the requirements of local (village/town), County and State Government, and any tent(s) found not to be in compliance with applicable laws and regulations will be subject to citations and/or immediate removal. Any false statement(s) made herein are punishable as a Class A misdemeanor pursuant to Section 210.45 of the Penal Law.

Signature: _____ **Date:** _____

FIRE MARSHAL USE ONLY

Check Amount _____ FOA # _____ LID # _____

Check # _____ Company ID # _____

Miscellaneous Comment _____