City of Salinas
SALINAS FIRE DEPARTMENT
• 200 Lincoln Ave. Salinas, California 93901
(831) 758-7466 • fireprevention@salinas.gov

Special Event Permit Application - *FIRE*

CFC 105.5.34 Open Burning. An operational permit is required for the kindling or maintain or an open fire or a fire on any public street, alley, road, or other public or private ground. Instructions and stipulations of the permit shall be adhered to.

Please complete the following form and all information requested. The Salinas Fire Prevention requires you submit this completed application form at least **30 calendar days** prior to the event. After review of the completed permit application, a permit & inspection fee will be applied. Make check payable to the "City of Salinas." Checks shall include your name, address and phone number professionally printed by a bank.

DATE OF EVENT:_____ **NAME OF EVENT:**_____

START/ENDING TIME Of Event: _____ **Open Flame Set Up Time:**_____

LOCATION OF EVENT(S): _____

PERSON OR ORGANIZATION REQUESTING PERMIT

Name: _____

Address: _____ State: _____ Zip Code_____

Cell Phone Number:_____

E-mail Address: _____

ON-SITE RESPONSIBLE PARTY: *(Contact to be used by inspector on day of inspection.)*

[ ] Same as Above

Name: _____

Address: _____ State: _____ Zip Code_____

Telephone Number:_____E-mail Address: _____

EVENT/OPEN FLAME DESCRIPTION: ***(check type of event/open flame)***

[ ] Dance [ ] Assembly [ ] BBQ Grill [ ] Food Vendor/ Food Truck (Open Flame) [ ] Race
[ ] Radio Remote/Remote Broadcast[ ] Photo [ ] Tents over 400sq' [ ] Canopies over 700sq'
[ ] Christmas Tree Lot [ ] Pyro Display [ ] Carnival [ ] Fundraiser [ ] Circus [ ] Torches
[ ] Candles / Open Flame Decorations [ ] Other _____

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- How many open flame vendor(s)? *Required: minimum 2A10BC Fire Extinguisher for* each *vendor, must be serviced.* _____
- How many vendor(s) will be deep frying? *Required: a serviced K Extinguisher for each deep-frying vendor.* _____
- How many Tents over 400sq'? _____
- What is the size of the tents? _____
- How many Canopies over 700sq'? _____
- What is the size of the canopy?_____
- Will there be any heat source use for display? Such as (Torches. Candles, etc) [ ] Yes [ ] No

Please have a design professional submit a layout(s) of the event. If applicable, submit canopies and tent layout(s).

For Site Map: A site map shall include the number of tents, canopies and/or booths. The dimensions of the temporary structures shall be provided. As well, as the distances from other tents, canopies, booths, buildings. Label vehicle parking areas and identify exits and entrances and any roadways for emergency access. Provide occupant load for designated event areas. Please keep in mind the occupant load can change based on event setup, this includes decorations, tables and chairs, bar setup etc.

For Canopies over 700sq' and Tents over 400 sq':
A seating/table arrangement plan, if applicable, indicate occupant load. Function of the space: standing space, tables and chairs, chairs only, mix used, seat spacing, aisle locations and widths, exit widths and locations of exits. Identify illuminated exit signs on the provided floor plan for tents and canopies only. Insure to install NO SMOKING signs. Occupant load must be posted and visible. Temporary emergency lighting shall be illuminated during the event and should be labeled at the circuit breaker.

DO NOT OBSTRUCT EXITS OR YOU WILL BE ASKED TO CHANGE THE SET UP, DURING THE INSEPCTION.

***Required Attachments*:**
Vendor list, site map and vendor type: Food Truck, pushcart, booth, tent.
Provide a contact list for those in charge of event areas.

Will tickets be sold? [ ] Yes; *In Advance or Day of Event?* [ ] No
Provide all ticket sales *includes online sales and those at the door*. _____

Projected Attendance: _____

Will you be requesting a Fire Engine to participate in the event? *(Request must be made **30 days** prior to event.)*
[ ] YES [ ] NO

If applicable provide approved TULP (Temporary Use of Land Permit) from City of Salinas Planning Department.
TULP Number:

Open Flame List:

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1. Name of Business: _____ Phone #_____
Type of Open Flame:_____ Phone#_____
On-Site Manager / Booth Operator:_____ Phone#_____

2. Name of Business: _____ Phone #_____
Type of Open Flame:_____ Phone#_____
On-Site Manager / Booth Operator:_____ Phone#_____

3. Name of Business: _____ Phone #_____
Type of Open Flame:_____ Phone#_____
On-Site Manager / Booth Operator:_____ Phone#_____

4. Name of Business: _____ Phone #_____
Type of Open Flame:_____ Phone#_____
On-Site Manager / Booth Operator:_____ Phone#_____

5. Name of Business: _____ Phone #_____
Type of Open Flame:_____ Phone#_____
On-Site Manager / Booth Operator:_____ Phone#_____

6. Name of Business: _____ Phone #_____
Type of Open Flame:_____ Phone#_____
On-Site Manager / Booth Operator:_____ Phone#_____

7. Name of Business: _____ Phone #_____
Type of Open Flame:_____ Phone#_____
On-Site Manager / Booth Operator:_____ Phone#_____

8. Name of Business: _____ Phone #_____
Type of Open Flame:_____ Phone#_____
On-Site Manager / Booth Operator:_____ Phone#_____

9. Name of Business: _____ Phone #_____
Type of Open Flame:_____ Phone#_____
On-Site Manager / Booth Operator:_____ Phone#_____

10. Name of Business: _____ Phone #_____
Type of Open Flame:_____ Phone#_____
On-Site Manager / Booth Operator:_____ Phone#_____

11. Name of Business: _____ Phone #_____
Type of Open Flame:_____ Phone#_____
On-Site Manager / Booth Operator:_____ Phone#_____

12. Name of Business: _____ Phone #_____
Type of Open Flame:_____ Phone#_____
On-Site Manager / Booth Operator:_____ Phone#_____

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PROPERTY OWNER CONSENT:

No Permit shall be issued until this Application is approved and is signed by an authorized representative of the City of Salinas Fire Department Personnel. A meeting may be required prior to approval. Please complete this Application in full and return it no later than ten (30) days prior to the proposed event. This event shall be conducted in strict accordance with all applicable local, state, and federal laws and regulations including but not limitedto, the noise restrictions imposed under the Salinas City Code upon amplified sound.

A site plan must be attached to this Application. Checks should be made payable to City of Salinas.

If you have any questions, please contact Brianda Palacios, Salinas Fire Department, Prevention Division at (831)758-7466.

In signing the application, I understand that I am responsible for all aspects as stipulated by and pertaining to the CFC for Open Flame Cooking for a Special Event. Failure to comply at any time will result in revocation of your participation at the above event. This permit application expires on the above date.

CERTIFICATION OF APPLICANT

I declare that I am 18 years of age or older and the information contained in the foregoing application is true and correct to the best of my knowledge. I have read, understand, and agree to abide by the rules and regulations governing Special Events under the Salinas City Code and I understand this application is made subject to the rules and regulations established by the City Council and/or the City Manager or theirdesignee. I also understand that misrepresentation of facts will cause this Permit to be null and void. I also understand that if an emergency Fire response is generated to this event, I may be charged for the Fire services required.

I further declare that I am authorized to enter into this Application for and on behalf of myself and the organization described above.

Signature_____ Date _____

Copy of approved permit shall be made available for the fire inspector to complete. Operators at the event not named on the fire permit shall not be allowed to conduct business and may be subject to citation up to $612.75.

Application will be considered incomplete if information is missing or not attached to application

OFFICE USE ONLY:
Site Map Checked By:_____
Date Plan Application Submitted:_____
Date Vendor List Provided:_____

Date Submitted:_____
Date Issued:_____
Prevention Staff:_____
Engine Company:_____