

Inspector

Signature:

BILLING INFORMATION

Sonoma County Fire District

Fire Prevention Division 8200 Old Redwood Hwy Windsor CA 95492 ~ 707-892-2441

Special Event Application / Permit

A FEE WILL BE CHARGED FOR THIS APPLICATION / PERMIT AT THE TIME OF SUBMITTAL

Note: This Application / Permit is not valid until it is signed by the Fire District

APPLICANT

ivame			Name						
Address	6		Address						
Email			Email						
Phone			Phone						
EVEN	NT .								
Address			Contact						
Email			Phone						
Event			N	umber of	Partici	cipants Event Date			
Name			Per	Per Day		Total	Start Date	End Date	
0	I.E. (D. Cl. (Ob.)	I I I I I I I I I I I I I I I I I I I							
Overai	I Event Profile (Check most applica EVENT CO	')	SAFETY PROVISIONS*						
	NATURE OF EVENT		VENUE			SECURITY			
С	Concert / Music Festival	Indoors			oors	Event Staff			
Exhibit / Trade Show			Parking / Traffic Access			Private Security			
Bicycle / Foot Race / Parade			Festival Seating / Standing			Law Enforcement			
Athletic / Sporting Event			Tables & Chairs			EMERGENCY MEDICAL			
Agricultural / Farmers Market		Tents- (Ar	Tents- (Application REQUIRED)			Event Staff First Aid			
Carnival / Fair / Circus / Haunted House			Heating Provided			Advance Life Support (ALS)			
M	Notor Sport		Generator Provided			Basic Life Support (BLS)			
	viation / Marine Event	FOOD &	FOOD & BEVERAGE			FIRE PROTECTION			
Р	olitical Rally	Catered /	Catered / Prepared off-site			Fire Extinguishers / Hoses			
V	Vedding		Barbeque / Grill on-site			Event Staff Fire Watch			
Р	yrotechnic Display	Deep Frye	Deep Fryer on-site			Fire Dept. Stand-by			
V	Vine Tasting	Ranges or	Ranges on-site			Fire Engine Stand-by			
Other		Alcohol Se	Alcohol Served			Fire Rescue Stand-by			
	declare under penalty of perjury, to t			beliefs, ti	he respo	onses made		and correct.	
Applica Signatu			Printed Name:			Date			
** If Sa	ne. Ifety Provisions are not sufficient for orm will act as your permit on	the event, additiona	al Safety I		•	-	•	•	
·		OFFICE USE ONLY	/ BELOV	V THIS F	POINT				
Station #		Local Agency and condition been added (I	s have	Public Safety I		lan	Required		
Su	ubject to the conditions noted on th	e Fire Inspection Fo	rm, Perm	it is here	by appi	roved. (Fire	Inspection Forn	n is attached)	
Permit/Inspection Fee:		Invoice#				Date Paid:			

Printed

Name:

Date: