



**Joseph Hundley**  
**Emergency Services Chief**

**Brock Smith**  
**Deputy Chief/Fire Marshal**



**Tent Permit**

Business Name: \_\_\_\_\_ Site Address: \_\_\_\_\_

Property Owner: \_\_\_\_\_ Phone: \_\_\_\_\_

Tent Contractor: \_\_\_\_\_ Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ Email: \_\_\_\_\_

WS/FC Inspections Division Zoning Permit Number: \_\_\_\_\_

Size of the tent to be installed (feet X feet) \_\_\_\_\_ X \_\_\_\_\_ = \_\_\_\_\_ sq. feet

Size of the Membrane to be installed (feet X feet) \_\_\_\_\_ X \_\_\_\_\_ = \_\_\_\_\_ sq. feet

**The following documentation shall be submitted a minimum of 48 hours before the scheduled installation of the tent/membrane structure:**

- Detailed site plan of the location of tent/membrane structure on property: NCFC 3103.6
- Detailed floor plan for tents/membrane structure with an occupant load of 50 or more: NCFC 3103.6
- Current flame certificates for sections of tent/membrane structure to be installed: NCFC 3104.4
- Location and size(s) of fire extinguishers required within the tent/membrane structure: NCFC 3104.12

**Fee Schedule**

The fee for the temporary tent/membrane structure permit is \$50.00. Credit card or check accepted. Checks made payable to: **FORSYTH COUNTY FIRE DEPARTMENT**

**Tents/membrane structures installed without a valid permit or failure of permit inspection will incur a civil penalty and re-inspection fee.**

**Other Information**

Plans are reviewed on a first-come, first-serve basis. For your convenience, a checklist for minimum requirements that will be inspected is included in this application.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Office Use Only**

Plans submitted Y or N Date Received \_\_\_\_\_ Date of event/install \_\_\_\_\_

Plans Approved Y or N Approved by: \_\_\_\_\_ Permit# \_\_\_\_\_ 5/23