

WHARTON BOROUGH

BUREAU OF FIRE PREVENTION

10 ROBERT STREET WHARTON, NJ 07885

MAIN: 973-361-8444 / FAX: 973-361-5281

07/2015

DATE:	
APPLICANT:	PAYMENT BY CHECK OR MONEY ORDER ONLY
ADDRESS:	
PHONE NO.: BUSINESS:	HOME:
REASON/PURPOSE FOR TENT:	
ADDRESS:	
CONTACT PERSON:	
TENT (S) DIMENSIONS:	
TYPE: OPEN SIDES	CLOSED SIDES
SET UP DATE AND TIME:	
APPLICANT MUST PROVIDE THE FOL	LLOWING WITH THIS APPLICATION:
1. SITE PLAN OF THE PROPERTY SHOWING TO ETC. TO SCALE.	HE TENT AND DISTANCES FROM PROPERTY LINES, BUILDINGS
	IENT, EXIT LOCATIONS, EXPECTED OCCUPANT LOAD, FIRE
3. COPY OF FLAME RESISTANCE RATING CER	RTIFICATE FOR EACH SECTION OF TENT OR STRUCTURE.
 ANY TEMPORARY ELECTRICAL SUPPLIES I AND INSPECTION (973-361-8444). 	MAY REQUIRE A BUILDING DEPARTMENT ELECTRICAL PERMIT
· · · · · · · · · · · · · · · · · · ·	OR TEMPORARY HEATING DEVICES WILL BE USED. PROVIDE EL, ETC.
	DAYS PRIOR TO THE EVENT TO ALLOW TIME
FOR REVIEW AND PROCESSING.	
I hereby acknowledge that I have read th	ais application and that the information given is correct,
·	· · · · · · · · · · · · · · · · · · ·
and that I am the owner, or duly authoriz	zed to act in the owners behalf, and as such agree to
and that I am the owner, or duly authorized comply with all applicable requirements	