



Application for a Special Event Permit
Coastside Fire Protection District, Prevention Bureau
1191 Main Street, Half Moon Bay, CA 94019
Telephone (650) 726-5213/ Fax (650) 726-0132

I/we hereby make application for a **Special Event Permit** (subject to the provisions of the Fire Prevention Code and other City and County Ordinances) to:

Type of Event: _____
Address of Event: _____
Dates of Events: _____

I will have the following present at this event:

- | | |
|---|---|
| <input type="checkbox"/> Tents: size and # _____ | <input type="checkbox"/> Exhibits requiring power |
| <input type="checkbox"/> Cooking facilities | <input type="checkbox"/> Refrigeration equipment |
| <input type="checkbox"/> Generator and power cables | <input type="checkbox"/> Non-flammable Compressed gas |

Explain above uses: _____

Please include a site plan with this application showing the following:

- | | |
|---|---|
| <input type="checkbox"/> Ingress and egress | <input type="checkbox"/> Bathrooms |
| <input type="checkbox"/> Fire extinguisher locations | <input type="checkbox"/> Parking |
| <input type="checkbox"/> Location of all tents | <input type="checkbox"/> Fire department access |
| <input type="checkbox"/> Location of all food preparation booths or tents | |

Name of responsible person: _____ **Phone #** _____

Address: _____ **Signature:** _____

Name of property owner: _____ **Phone #** _____

Mailing address of property owner: _____

Reviewed by: _____ **Date approved:** _____

Paid Amount \$201.75 Received by: _____ **Receipt #** _____