

MONARCH FIRE PROTECTION DISTRICT



13725 OLIVE BLVD., CHESTERFIELD, MO 63017

314-514-0900, EXT. 2234

fireprevention@monarchfpd.org

www.monarchfpd.org

APPLICATION FOR PERMIT-SPECIAL EVENT/TENT

This entire application must be completed and submitted with all required documentation.

Spaces not applicable to your event should be marked "N/A."

Incomplete applications or documentation will delay or prohibit approval of your event.

EVENT INFORMATION		
NAME OF EVENT:		
EVENT DATES:	SET-UP DATE:	DATE/TIME OF INSP:
EVENT LOCATION/PROPERTY NAME:		
ADDRESS OR NEAREST STREET INTERSECTION:		
PROPERTY OWNER INFORMATION		
PROPERTY OWNER:		PHONE:
EMAIL:		FAX:
ADDRESS:	CITY/STATE/ZIP:	
CONTACT:	CELL:	
EMAIL:		
EVENT HOST ORGANIZATION INFORMATION		
BUSINESS NAME:		PHONE:
EMAIL:		FAX:
ADDRESS:	CITY/STATE/ZIP:	
CONTACT:	CELL:	
EMAIL:		
APPLICANT INFORMATION		
NAME:		
ADDRESS:	CITY/STATE/ZIP:	
CONTACT:	CELL:	
EMAIL:		
NUMBER OF PARTICIPATING VENDORS OR PARTICIPATING ORGANIZATIONS:		
ANTICIPATED # OF PERSONS PARTICIPATING:		
ANTICIPATED # OF PERSONS ATTENDING		

ADDRESS:

PERMIT #:

# OF TENTS/CANAPIES/BOOTHS	SIZE	TYPE

For additional Tents attach separate sheet. Provide plans and specifications for tents/canopies in accordance with **"TENT/CANOPY SUBMITTAL REQUIREMENTS"**. Separate permits are required for each vendor or participating organization.

COOKING TENT: ___ Yes ___ No
IF YES: ___ In Tent ___ Outdoor (20Ft. Separation Required) Cooking Fuel: ___ Propane ___ Charcoal ___ Wood ___ Electric
LP-GAS: ___ Yes ___ No
TANKS 500 GAL. OR LESS to be located <i>at least 10 ft.</i> from tent/canopy and cooking equipment, MORE THAN 500 GAL. <i>at least 25 ft.</i> from tent. All containers shall be protected from tampering and damage by vehicles or other hazards, and securely fastened in place.
POWER SUPPLY
GENERATORS are required to be located at least 20 ft. from tent/canopy and be isolated from public contact by fencing, enclosure or other approved means.

NAME OF TRUCK	SIZE	TYPE

For additional Trucks attach separate sheet.

TYPE OF EVENT (CHECK ALL THAT APPLY)	
___ Athletic/Recreation ___ Concert/Performance ___ Circus ___ Carnival ___ *Fireworks Display ___ Exhibit/Misc. ___ Merchandise Sales ___ Craft Fair ___ Food/Ethnic ___ Celebration ___ Dance ___ Museum/Special Attraction ___ Other (Specify) _____	
*Separate Permit required. Provide plans and documentation for fireworks in accordance with fireworks requirements.	
DISCLAIMER AND SIGNATURE	
PLEASE READ BEFORE SIGNING THIS FORM: I certify that I am the owner/agent authorized to apply for this permit and all information herein is true and correct. I understand work cannot begin before this permit is issued and that occupancy or use is not granted until the Fire District final inspection is APPROVED.	
SIGNATURE:	TITLE:
PLEASE PRINT NAME HERE:	DATE:
OFFICE USE ONLY	
PERMIT APPROVED BY _____	DATE _____ PERMIT FEE _____
PERMIT ISSUED BY _____	DATE _____ ENTRY DATE _____

☐ CREDIT ☐ CASH ☐ CHECK # _____ RECEIPT # _____