



**TOWN OF PLAINVILLE**  
**BUILDING DEPARTMENT**  
 190 South Street  
 Plainville, MA 02762  
 508-576-8491

**TENT PERMIT APPLICATION**

Permit Number: \_\_\_\_\_

**TENT PERMIT CHECKLIST**

Location: \_\_\_\_\_ Date Submitted: \_\_\_\_\_

**Please verify that the following items are to be completed:**

- \_\_\_\_\_ Attach completed Building Permit with Worker's Compensation Affidavit and Certificate of Insurance
- \_\_\_\_\_ Submit a site plan showing the tent on the lot with means of egress, Fire Dept. access (Can be hand drawn on opposite side)
- \_\_\_\_\_ Attach a copy of the flame-resistant certificate for each tent, side wall or drops
- \_\_\_\_\_ Fire extinguisher(s)
- \_\_\_\_\_ No smoking signs
- \_\_\_\_\_ Call Dig Safe before you dig, excavate, or drive posts or pipes

**If there are side panels or if the tent will be used after dark, check if the following items will be installed:**

- \_\_\_\_\_ Egress lights/emergency lights (**MANDATORY**)
- \_\_\_\_\_ Exit signs (**MANDATORY**)
- \_\_\_\_\_ Doors (**MANDATORY**)
- \_\_\_\_\_ Propane Heaters (attach approval/permit from the fire department)
- \_\_\_\_\_ Generator(s) (must have 20' separation from tent)
- \_\_\_\_\_ Occupancy: How many people will occupy the tent?
  - \_\_\_\_\_ Less than 50
  - \_\_\_\_\_ Over 50, need floor plan showing tables, seating and egress
  - \_\_\_\_\_ Over 249, need fire department approval

**Installation Date:** \_\_\_\_\_ **Removal Date:** \_\_\_\_\_ **Size of Tent:** \_\_\_\_\_

**Property Owner:** \_\_\_\_\_ **Phone:** \_\_\_\_\_ **Cell:** \_\_\_\_\_  
**Address:** \_\_\_\_\_ **Email:** \_\_\_\_\_  
**City, State, Zip:** \_\_\_\_\_

**Name of Contractor/Supplier:** \_\_\_\_\_ **Phone:** \_\_\_\_\_ **Cell:** \_\_\_\_\_  
**Address:** \_\_\_\_\_ **Email:** \_\_\_\_\_  
**City, State, Zip:** \_\_\_\_\_

***Additional Information May Be Required***  
***Application must include Flame Retardant Certificate and Certificate of Insurance***

CERTIFICATION (READ BEFORE SIGNING): THE UNDERSIGNED HEREBY CERTIFIES THAT HE/SHE HAS EXAMINED THIS APPLICATION AND THAT THE PROPOSED WORK IS SUBJECT TO THE PROVISIONS OF THE MASSACHUSETTS STATE BUILDING CODE AND OTHER APPLICABLE LAWS AND ORDINANCES ACCURATELY REPRESENTED IN THE STATEMENTS MADE IN THIS APPLICATION AND THE WORK SHALL BE CARRIED OUT IN ACCORDANCE WITH THE FOREGOING STATEMENTS AND IN COMPLIANCE WITH THE PROVISIONS OF THE LAWS AND ORDINANCES IN EFFECT ON THE DATE OF THIS APPLICATION.

Signatures:

\_\_\_\_\_  
 Owner Date Inspector of Buildings Date