



# TENT PERMIT APPLICATION

## Application Requirements

This application must be completed and submitted with an application fee and ALL required attachments.  
(Checks payable to the City of Palatka)

### Required Attachments:

- Fire Safety Inspection
- Letter of Authorization from Property Owner
- Certification of Tent Fire Resistance
- Site Plan
- Noise Variance (if required)

## Property Information

1. Address/Location for Tent: \_\_\_\_\_
2. Parcel Number: \_\_\_\_\_
3. Tent Square Footage: \_\_\_\_\_
4. Will there be portable toilets placed on site? \_\_\_\_\_
5. Property use and description of activities occurring on the site:  
\_\_\_\_\_  
\_\_\_\_\_
6. Specific description of the type of sales (including type of goods to be sold, hours/days of the week of operation):  
\_\_\_\_\_  
\_\_\_\_\_
7. Is there adequate parking? \_\_\_\_\_
8. Describe what tent will be used for:  
\_\_\_\_\_  
\_\_\_\_\_
9. Will there be any electrical work done inside the tent? (If yes, a permit may be required) \_\_\_\_\_
10. Proposed length of time tent will be on site (including date and hours of operation):  
\_\_\_\_\_

## Information

### Property Owner Information:

Property Owner Name(s): \_\_\_\_\_

Property Owner Address: \_\_\_\_\_

Phone Number(s): \_\_\_\_\_ Email: \_\_\_\_\_

**Information (continued)**

**Applicant Information:**

Name of Business: \_\_\_\_\_

Owner Name(s): \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Phone Number(s): \_\_\_\_\_ Email: \_\_\_\_\_

**To Be Notarized**

Name (Print Name): \_\_\_\_\_

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

STATE OF \_\_\_\_\_ County of \_\_\_\_\_

Before me this day personally appeared \_\_\_\_\_ who executed the foregoing application and acknowledged to and before me executed this document for the purposes therein expressed.

WITNESS my hand and official seal, this \_\_\_\_\_ day of \_\_\_\_\_ A.D. \_\_\_\_\_.

(Notary Seal)

\_\_\_\_\_  
Notary Public

My commission expires: \_\_\_\_\_ State of \_\_\_\_\_ at Large  
Type of Identification Produced: \_\_\_\_\_

**For Official Use Only**

Received By: \_\_\_\_\_

Date Received: \_\_\_\_\_

Zoning Designation: \_\_\_\_\_

Current FLU Designation: \_\_\_\_\_

Preliminary Review By: \_\_\_\_\_

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

Electrical Permit Required: \_\_\_\_\_