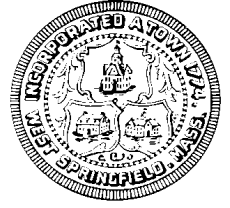


*The Commonwealth of Massachusetts  
Board of Building Regulations and Standards  
Massachusetts State Building Code, 780 CMR*



**Town of West Springfield**  
Building Department  
26 Central Street, West Springfield, MA 01089

**TENT PERMIT APPLICATION**

Date: \_\_\_\_\_ Fee: \_\_\_\_\_ Permit Number: \_\_\_\_\_

**Property Owner:**

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

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

City/State/Zip Code: \_\_\_\_\_

**Contractor Information:**

Company: \_\_\_\_\_ Phone: \_\_\_\_\_

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

City/State/Zip Code: \_\_\_\_\_

Name of Installer: \_\_\_\_\_ License # \_\_\_\_\_

**Tent Information:**

Location of Tent: \_\_\_\_\_

Tent Will Be Erected From Start Date: \_\_\_\_\_ Until Ending Date: \_\_\_\_\_

Size of Tent: Length: \_\_\_\_\_ Width: \_\_\_\_\_ Area: \_\_\_\_\_ Height: \_\_\_\_\_

Number and Type of Seating: \_\_\_\_\_  Chairs \_\_\_\_\_  Bleachers \_\_\_\_\_

Capacity/Occupant Load of Tent: \_\_\_\_\_

Number and Size of Exits: \_\_\_\_\_

Number and Type of Fire Extinguishers on Hand: \_\_\_\_\_

**Estimated Cost:** \$ \_\_\_\_\_

**Flame Resistance Affidavit:** I certify that all tent top and sidewall materials to be installed meets or exceeds the requirements of NFPA 701 International Fire Code concerning tents and membrane structures, that each item is identified by a Certificate of Flame Resistance attached to it, and that original certificates are on file at the installer's office.

**Installation Affidavit:** I certify that the tent listed will be installed according to known site conditions, generally accepted industry practices, and the manufacturer's recommendations (a copy of which is available at the installer's office).

**I hereby certify that to the best of my knowledge the information provided above is true and accurate.**

**Signature of Applicant:** \_\_\_\_\_ **Date** \_\_\_\_\_