



Date Received:
SR#

**TENT PERMIT PLAN REVIEW REQUEST  
DALLAS FIRE-RESCUE DEPARTMENT  
FIRE PREVENTION EDUCATION AND INSPECTION**

<b>Tent Location Address:</b>
<b>Occupancy Name:</b>
<b>Submitter Name:</b>
<b>Business Address:</b> <span style="float: right;"><b>Phone/Fax #:</b></span>
<b>Date of Event Held Within Tent(s) Permitted:</b>
<b>Description of Tent:</b>
<b>Purpose of Tent:</b>

**PLANS MUST BE SUBMITTED AT LEAST 15 DAYS PRIOR TO SCHEDULED OPENING OF EVENT**

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

**Permit Fee: \$75.00, Payable to the City of Dallas/Fire Permit**

<b>Amount Paid:</b>	<b>Check/Money Order #:</b>	<b>Rcvd By:</b>	<b>Date:</b>
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