



**CHARLOTTE FIRE DEPARTMENT
FIRE PREVENTION BUREAU
Carnival, Fair and Festival Permit Application**

Applicant

This is the name or company and mailing address of the permit applicant. NOTE: You must provide name of event.

Name:	Name of Event:		
Event Description:	Estimated Attendance:		
Address:	Unit/Suite:	Zip Code:	
Phone Number: ())	Fax Number: ())		

Location and Date(s) of Event

This is the name and address of the actual location of the carnival, fair or festival.

Facility Name:	Show Date(s):		
Address:			
City:	State:	Zip Code:	

Emergency Contacts

Provide the names and phone numbers of a minimum of two show contacts.

1.	Ph: ())	Cell/Pager: ())
2.	Ph: ())	Cell/Pager: ())

Responsible Applicant

Name: _____ Title: _____

Signature: _____ Date: ____/____/____

I certify that the information provided and contained herein is true and accurate to the best of my knowledge. The issuance of a permit shall not be deemed as approval to violate any provisions of the North Carolina State Fire or Building Codes. The code official has the right to inspect the premises to ensure compliance with provisions of the fire code and has the authority to cease all activities for unsafe and non-compliant practices.

NOTE! A set of scaled drawings shall be submitted with this application and be available at the event site for reference by the fire official at his or her request. Plan set must include location of perimeter fencing, emergency vehicle access, calculated occupant load, fire protection, emergency exit locations, occupant egress routes and the location of all tents, stages and other amusements.

Return this completed application and check to:
Charlotte Fire Department – Fire Prevention Bureau
500 Dalton Avenue
Charlotte, North Carolina 28206
Phone: 704-336-2101 Facsimile: 704-632-8451

If paying by credit card, please contact the Fire Prevention Bureau Office directly

CFD Office Use Only

Permit Code: 4 Fee: \$ 400.00 Ck # _____ Valid From: ____/____/____ Valid Through: ____/____/____
Issued by Inspector: _____ Emp. #: _____