

**CITY OF WINTER GARDEN – TENT PERMIT**

**110 HENDERSON ST•WINTER GARDEN, FL 34787•(407) 656-4111 EXT 2245•FX (407) 656-0839**

Permit Number \_\_\_\_\_ Date Submitted \_\_\_\_\_

Property owner: \_\_\_\_\_

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

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

Phone #: \_\_\_\_\_

Tent Contractor: \_\_\_\_\_

Address \_\_\_\_\_

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

Contact Name \_\_\_\_\_ Phone #: \_\_\_\_\_

Purpose of tent/Name of event: \_\_\_\_\_

*(If used as an Assembly, seating arrangement required)*

Location of tent: \_\_\_\_\_

*(Include a map of area where the tent will be located)*

Set up date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Takedown date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Size/Dimensions of tent: \_\_\_\_\_

Type of electrical source: \_\_\_\_\_

Approximate number of spectators and participants: \_\_\_\_\_

Number of restrooms and type: \_\_\_\_\_

Number of trash bins and type: \_\_\_\_\_

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

***Office Use Only:***

Zoning: \_\_\_\_\_ Approved \_\_\_\_\_ Denied \_\_\_\_\_ Date: \_\_\_\_\_

Fire: \_\_\_\_\_ Approved \_\_\_\_\_ Denied \_\_\_\_\_ Date: \_\_\_\_\_

Police: \_\_\_\_\_ Approved \_\_\_\_\_ Denied \_\_\_\_\_ Date: \_\_\_\_\_

Building: \_\_\_\_\_ Approved \_\_\_\_\_ Denied \_\_\_\_\_ Date: \_\_\_\_\_

**\*\* A FIRE RETARDENT CERTIFICATE MUST BE SUBMITTED WITH APPLICATION. THE # OF FIRE EXTINGUISHERS WILL BE DETERMINED BY FIRE MARSHAL OR INSPECTOR.**

**\*\*\* APPLICATION MUST COMPLY WITH CITY CODE SEC. 118-1310 (f)(1)**