

## Tent/Canopy or Temporary Event Staging Permit Application

If you or the property owner owes real estate or personal property taxes or user charges on any property within the City, payment arrangements must be made before permits of any kind are accepted.

Date of Set up/Event /2/11/15	Date of Breakdown/ End of Event	
Tax Assessor's Chart, Block & Lot	Property Owner:	Telephone:
Chart# Block# Lot#	Name: City of Pornams Address: E-Mail:	
Lessee/Buyer's Name (If Applicable)	Applicant Info:	
Name:		Fee: \$30.00
Address:		For each event, each
E-Mail:		tent, each stage.
Phone:	Phone: (207) 772-6878	
<ol> <li>Certificate of Flammability</li> <li>Letter of approval from property own</li> </ol>	er.	
<ol> <li>Letter of approval from property own If the City is owner, attach a complex &amp; Recreation (756-8275).</li> <li>Company name of installer (contact in Plot Plan showing the following:         <ul> <li>Tent/Canopy or temporary proposed and existing, will need to include proportland's Parks @ 750</li> </ul> </li> </ol>	deted copy of Application to Use City Parks (afo).  Departure event staging locations, including dimensional parking and existing building locations. If this oduct information. (Applicant may call Parks & 6-8275).	ons, exits and entrances of is temporary staging, you Recreation for maps of
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In order to be sure the City fully understands the full scope of the project, the Planning and Development Department may request additional information prior to the issuance of a permit. For further information visit us on-line at <a href="https://www.portlandmaine.gov">www.portlandmaine.gov</a>, stop by the Building Inspections office, room 315 City Hall or call 874-8703.

I hereby certify that I am the Owner of record of the named property, or that the owner of record authorizes the proposed work and that I have been authorized by the owner to make this application as his/her authorized agent. I agree to conform to all applicable laws of this jurisdiction. In addition, if a permit for work described in this application is issued, I certify that the Code Official's authorized representative shall have the authority to enter all areas covered by this permit at any reasonable hour to enforce the provisions of the codes applicable to this permit.

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Signature of Applicant:	Date:	