

Fire Permit #:	City of Santa Rosa Fire Department 2373 Circadian Way, Santa Rosa, CA 95407 SPECIAL EVENT PUBLIC ASSEMBLY PERMIT APPLICATION (applications & payments not accepted more than 6 months in advance)	Office: (707) 543-3500 Fax: (707) 543-3520
Fee: \$148.00 (Each Event) \$296.00 if less than 5 day notice (Fees Effective 7-1-19 to 6-30-20) Date Paid:		
THIS IS NOT A PERMIT! A Permit will be issued only upon compliance with all applicable requirements.		
Description of Event:		
Address of Event:		
Date of Event:		Hours of Event:
An inspection is REQUIRED before the event starts. Specify when you will be ready for an inspection:		
Date:	Time:	Contact Person: Phone #:
The following information is required to be submitted with this application. All information must be provided <u>before</u> this application is accepted and processed:		
Yes <input type="checkbox"/> No <input type="checkbox"/>	Floor plans, include location of tables, chairs, stages, aisles, exits, displays, booths, etc. Plan shall have dimensions and/or scale indicated.	
Yes <input type="checkbox"/> No* <input type="checkbox"/>	Provide certificate of flame retardant for all decorations, if used. *If no, explain here: _____ Contact person for decorations: Phone #:	
Yes <input type="checkbox"/> No <input type="checkbox"/>	Total anticipated occupant load. Number of tickets sold: Number of people at any one time:	
Yes <input type="checkbox"/> * No <input type="checkbox"/>	Will candles/open flame devices be used? *If yes, describe devices: _____ Contact person for candles, etc.: Phone #:	
Yes <input type="checkbox"/> * No <input type="checkbox"/>	Will tents, canopies, or awnings be used? *If yes, a separate permit may be required. Indicate size of tent or canopy: _____ Contact person: Phone #:	
Yes <input type="checkbox"/> No <input type="checkbox"/>	Will there be cooking on site? If propane is used, a separate permit is required. Contact person: Phone #:	
Yes <input type="checkbox"/> No <input type="checkbox"/>	Provide a City Business Tax Certificate if event is selling goods or services. Contact Revenue & Collections at (707) 543-3170. Certificate #	
APPLICANT INFORMATION:		
Organization/Company/Individual:		Phone #:
Address of above:		City, State, Zip:
Mailing Address:		City, State, Zip:
Contact Person:		Phone #:
Signature of Applicant:		Date:



CREDIT CARD AUTHORIZATION

The City of Santa Rosa Fire Department is authorized to charge my credit card the amount of:
(select all appropriate) *(fees effective until June 30, 2020)*

_____ \$148.00 Special Event*

_____ \$296.00 Special Event – less than 5 business days

*(NOTE: multiple day events may require additional inspections, which will be subject to inspection fees)

_____ \$69.00 Limited Propane

_____ \$138.00 Limited Propane – less than 2 business days

_____ \$228.00 Tent permit*

_____ \$456.00 Tent permit – less than 5 business days.

*(NOTE: multiple tents may require multiple tent permits. A site map with details will be required with the application prior to payment)

\$ _____ Other

\$ 399.00 Tubbs

I authorize a one-time use of the following:

(we only accept the following)

Circle One: MasterCard Visa Discover

Number: _____ - _____ - _____ - _____

Code from back: _____

Exp. Date: _____

Name on Card _____

Phone Number: _____

Billing address: _____

Billing city: _____ Billing zip: _____

Signature: _____ Date: _____