

CITY OF SALISBURY

Department of Infrastructure & Development
125 N. Division St., Rm. #202
Salisbury, MD 21801
Ph: 410-548-3130 Fax: 410-548-3107
www.salisbury.md

Tent Permit #: _____

TENT PERMIT APPLICATION

TENT INFORMATION

Proposed Tent Site: _____ Application Date: _____

Proposed Use of Tent: _____

Date Erected: _____ Date To Be Removed: _____

Size of Tent(s): _____ Color: _____

Supplier of Tent: _____

Flame Retardant Certificate: Included On Tent

PROPERTY OWNER INFORMATION

Property Owner(s) Name: _____

Owner(s) Address: _____ Owner(s) Phone: _____

Email: _____

Phone Number at Tent Site: _____

APPLICANT'S INFORMATION

Applicant's Name: _____ Applicant's Phone: _____

Applicant's Email: _____

*** Note: If tent occupant load exceeds 50 persons, a tent plan must be filed with the Wicomico County Fire Protection Division. A Permit Fee of \$40.00 is required & payment must be made at time of application.**

Applicant agrees that all of the above information is accurate. This permit will expire on the removal date listed above.

Signature: _____ Date: _____

FOR OFFICE USE ONLY

Approved Denied

Director/Zoning Administrator

Date