

# CITY OF SALISBURY

Department of Infrastructure & Development  
125 N. Division St., Rm. #202  
Salisbury, MD 21801  
Ph: 410-548-3130  
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 City of Salisbury Fire Marshal. 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