


<p>THE CITY OF HOLYOKE</p> <p>PERMIT APPLICATION FOR TEMPORARY TENT PERMIT</p>	<p>The City of Holyoke Building Department 20 Korean Veterans Plaza Room 300 Holyoke, MA 01040 413-322-5600 www.holyoke.org</p>	
<p>This Section for Official Use Only</p>		
<p>Property has no uncollected tax, fines, fees, or other charges owed to the City of Holyoke <input type="checkbox"/></p>		<p>initial _____</p>

A tent permit is required if the tent is greater than 400 sq. ft. with one or more sides or the tent is greater than 700 sq. ft. with open sides. *A certificate of flame resistance shall accompany each tent application.*
Each tent application is \$75 per 30 days, for a maximum of 180 days.

<p>SECTION 1: SITE INFORMATION</p>		<p><i>All property information can be found at holyokema.mapgeo.io</i></p>
<p>1.1 Property Address: _____</p>	<p>1.2 Assessors Map / Parcel ID Numbers (optional)</p> <p>_____ - _____ - _____</p> <p style="text-align: center; font-size: small;">Map Number Block Number Parcel Number</p>	
<p>SECTION 2: PROPERTY OWNERSHIP</p>		
<p>2.1 Owner of Record:</p> <p>_____</p> <p>Print Name</p> <p>_____</p> <p>Street Address</p> <p>_____</p> <p>City / State / Zip</p>	<p>2.2 Owner Contact Information:</p> <p>_____</p> <p>Phone number (REQUIRED)</p> <p>_____</p> <p>Email address (REQUIRED)</p>	
<p>SECTION 3: EVENT INFORMATION</p>		
<p>3.1 Event Address: _____</p> <p>3.2 Event Dates (MM/DD/YY): _____</p> <p>3.3 Name of Sponsoring Organization (if applicable): _____</p>		
<p>SECTION 4: INSTALLER INFORMATION</p>		
<p>4.1 Installer Name: _____</p> <p>4.2 Installer Contact Information: _____</p>		
<p>SECTION 5: TENT INFORMATION</p>	<p>SECTION 5: MISC.</p>	
<p>5.1 Size of tent(s): _____ Capacity: _____</p> <p>5.2 Type of Construction: Poles & Ropers Frames</p> <p>5.3 Type of Seating: Chairs Bleachers Number: _____</p> <p>5.4 Number and size of exits: _____</p> <p>5.5 Please describe how paths of egress are protected:</p> <p>_____</p>	<p>Is all cooling and heating equipment properly installed and protected? _____</p> <p>Means of extinguishing fire: _____</p> <p>How is the structure lit? _____</p> <p>Emergency Lighting: _____</p> <p>_____</p>	
<p>SECTION 6a: OWNER OR AUTHORIZED AGENT DECLARATION</p>		

By entering my name below, I hereby attest under the pains and penalties of perjury that all the information contained in this application is true and accurate to the best of my knowledge and understanding. I understand that it is my responsibility to make sure all provisions of the City of Holyoke Zoning Ordinance and Massachusetts Laws are adhered to.

Plot plan is completed on the following page.

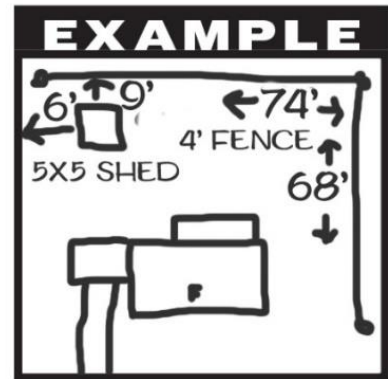
MUST BE SIGNED by Owner

Date

SECTION 5b: PLOT PLAN

Please fill out this plot plan as accurately as possible. Placements may be approximate but dimensions need to be exact. Do not use estimated dimensions. Please use the checkboxes below to ensure you have addressed all requirements.

- ☐ All property lines and dimensions
- ☐ All adjacent streets and street names.
- ☐ House/Primary Structure (*please indicate front*)
- ☐ All other structures
(decks, porches, pools, detached garages, sheds, etc)
- ☐ Driveway
- ☐ Easement(s) if applicable
- ☐ Wetlands or Natural Heritage land if applicable



FRONT OF LOT