



Town of Dublin
1120 Main Street
Dublin, NH 03444

TENT PERMIT

Date Received: _____

Map & Lot #: _____

Permit #: _____

Fee: \$50.00 Paid: ☐

Please note that Fees are Nonrefundable

Please print in ink or type all information

The undersigned applied for a permit for the work described below.

Owner's Name and Mailing Address: _____

Location (# & Street): _____

*******Permit must be obtained before work is started and notice given to Inspector when ready for inspection 48 hours in advance*******

Describe work to be performed: _____

Required Documents:

Certificate of Flame proofing or labeling on tent

Occupancy/Use Group Classification of tent, IBC (3103.1) NFPA 101 (11.11.2.1) & 102 (8.1.2)

Structural / Construction Documents, IBC (3102.2); NFPA 102(8.2)

Anchoring Type, Stakes and or Ballast, Load documentation required for over 300 occupants

Seating Plan for Assembly permit for 50 or more occupants (Fire Chief)

Emergency Evacuation Plan

Required Fire Extinguishers, No Smoking Signs, Exit Signs or Emergency Lighting

Company Name and Address: _____

_____ Phone #: _____

Signature: _____ Date: _____

(Owner or Contractor)

Approval/Signature: _____ Date: _____

(Michael Borden, Building Inspector)

Office: 603-563-8544 Cell: 603-547-0437