

City of Fond du Lac



FIRE & EMERGENCY SERVICES DEPARTMENT

FIRE SERVICES * EMERGENCY MANAGEMENT * HAZARDOUS MATERIAL

Return completed form to: FDL Fire/Rescue, 815 S. Main St., Fond du Lac, WI 54935 or
 Email: fire@fdl.wi.gov or
 Fax: 920.322.3801



PETER O'LEARY, FIRE CHIEF

Special Event ~ Application / Permit

*Note: This Application / Permit is not valid until signed by a Fire Department Representative.
 Please PRINT (ballpoint pen) or TYPE*

APPLICANT				<input type="checkbox"/> Invoice Applicant		
Name		Business Name				
Mailing Address		Business Phone		Business Fax		
City State Zip		Applicant e-Mail				
CONTRACTOR (If Applicable)				<input type="checkbox"/> Invoice Contractor		
Name		Business Name				
Mailing Address		Phone		Fax		
City State Zip		Contractor e-mail				
EVENT						
Address			Contact Name			
City State Zip			Contact Phone		Cell Phone	
Event Name			Event Date		Event Time	
			Start Date:	End Date:	Start Time:	End Time:

Overall Event Profile (Check most applicable and all that apply)

EVENT CONDITIONS		SAFETY PROVISIONS		
NATURE OF EVENT	VENUE	SECURITY		
<input type="checkbox"/> Concert / Music Festival <input type="checkbox"/> Exhibit / Trade Show <input type="checkbox"/> Bicycle / Foot Race / Parade <input type="checkbox"/> Athletic / Sporting Event <input type="checkbox"/> Agricultural / Farmers Market <input type="checkbox"/> Carnival / Fair / Circus / Haunted House <input type="checkbox"/> Motor Sport <input type="checkbox"/> Aviation <input type="checkbox"/> Political Rally <input type="checkbox"/> Marine Event <input type="checkbox"/> Pyrotechnic Display <input type="checkbox"/> Bonfire <input type="checkbox"/> Festival	<input type="checkbox"/> Indoors <input type="checkbox"/> Outdoors <input type="checkbox"/> Tents <input type="checkbox"/> Stage <input type="checkbox"/> Parking / Traffic Access <input type="checkbox"/> Festival Seating / Standing <input type="checkbox"/> Tables & Chairs <input type="checkbox"/> Heating Provided <input type="checkbox"/> Generator Provided	<input type="checkbox"/> Event Staff <input type="checkbox"/> Private Security <input type="checkbox"/> Law Enforcement <input type="checkbox"/> None		
	FOOD & BEVERAGE		EMERGENCY MEDICAL	
	<input type="checkbox"/> Catered / Prepared off-site <input type="checkbox"/> Barbeque/Grill on-site/Mobile Food Vendor <input type="checkbox"/> Ranges on-site <input type="checkbox"/> Alcohol Served <input type="checkbox"/> Deep Fryer on-site <input type="checkbox"/> Extinguishers <input type="checkbox"/> Fire Suppression System		<input type="checkbox"/> Ambulance Stand-by * FIRE PROTECTION <input type="checkbox"/> Fire Dept. Stand-by **	

I declare under penalty of perjury, to the best of my knowledge and beliefs, the responses made herein are true and correct.

Applicant Signature:	Printed Name:	Date
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***The following are the hourly rates for special events.
 An invoice for the special event will be sent following the completion of the event.***

Safety Provision - * Ambulance Stand-by: 1 Ambulance; 2 Personnel = \$150.00/Hour
 ** Fire Department Stand-by: 1 Engine; 3 Personnel = \$200.00/Hour

OFFICE USE ONLY BELOW THIS POINT		
Local Fire Agency	<input type="checkbox"/> Local agency notified and conditions have been added (if any).	Site Visit <input type="checkbox"/> Completed
Inspector Signature:	Printed Name:	Date