

**Application Form
Special Event
Permit**

**Inspections Services
Regulatory Services**
505 South 4th Avenue, Room 510A
Minneapolis, MN 55415
Office 612-673-3000 or 311
Fax 612-673-3699
TTY 612-673-2157
minneapolismn.gov/fire-permits



Office Use Only

Permit # _____

Amount \$ _____

Inspector Initials _____ Date _____

FIRE SERVICES PERMIT – SPECIAL EVENT

ADDRESS OF EVENT (INCLUDE ADDRESS #, STREET NAME, & DIRECTIONAL), Apt/Unit#

APPLICANT

APPLICANT or BUSINESS NAME (applicant is: Owner Contractor Other)

REPRESENTATIVE NAME (if applicable)

PHONE

OPERATOR NAME

PHONE

ADDRESS (cannot be PO Box or commercial mailing service)

CITY

STATE

ZIP

EMAIL ADDRESS

EVENT INFORMATION

EVENT NAME

EVENT START TIME & DATE

EVENT END TIME & DATE

APPROXIMATE SET UP TIME

PERMIT INFORMATION

check all that apply – please be aware that events requiring a fire watch require an extra fee

Amusement Building (\$75.40)

Open Flame or Candles in Assembly Area (\$75.40)

Bonfire – one time (\$75.40)

Pyrotechnical Effects (\$150.70)

Controlled Burn (\$75.40)

Temporary Conditional Use (Complete [Policy 10-6](#))

Exhibits & Trade Shows (\$150.70)

Temporary LP Usage (\$75.40 per tank)

Fireworks Display – outdoor/explosive (\$301.40)

Tent & Other Membrane Structure (\$75.40)

HOW WILL PRODUCT BE TRANSPORTED TO EVENT

HOW WILL PRODUCT BE STORED AT EVENT

REQUIRED INFORMATION

the following must accompany the permit application form

FOR EXHIBITS & TRADE SHOWS, TENT & OTHER MEMBRANE STRUCTURES, AND TEMPORARY ASSEMBLY PERMITS	FOR TENT & OTHER MEMBRANCE STRUCTURE PERMITS	FOR FIREWORKS DISPLAY AND PYROTECHNICAL EFFECT PERMITS
<input type="checkbox"/> A detailed floor plan showing the means of egress, seating arrangements, extinguisher placement, and the location and type of heating and electrical equipment. Include the location and separation distance of other nearby structures.	Type of structure: _____ Size of structure: _____ <input type="checkbox"/> Proof of flame-resistant treatment of tent or membrane structure per NFPA 801.	<input type="checkbox"/> Certificate of Public Liability Insurance <input type="checkbox"/> Shooter's License & Minnesota License <input type="checkbox"/> Site Plan

The undersigned hereby agrees that all information on this application is true and correct, and to comply with all applicable city ordinances, state and federal rules, and all orders from Minneapolis Fire Inspections Services.

SIGNATURE _____ **DATE** _____

PAYMENT OPTIONS

In person at the City of Minneapolis Service Center, Monday through Friday, 7:30 AM to 4:00 PM:

Public Service Building
505 South 4th Avenue, Skyway Level
Minneapolis, MN 55415

By mail, with a check payable to Minneapolis Finance Department, or the below credit or debit card information, mailed to:

Inspection Services
505 South 4th Avenue, Room 510A
Minneapolis, MN 55415

MasterCard or Visa only

Card Number _____

Expiration Date _____ CVV _____

By secure fax, with the below credit or debit card information:

MasterCard or Visa only

Card Number _____

Expiration Date _____ CVV _____

Secure fax to **612-673-3699**