Print Form

APPLICATION

CHULA VISTA FIRE DEPARTMENT

Temporary Membrane Structures & Tents

Name of Project: _____ **Submittal Date:** _____

Project Address (range): _____

Bldg Permit Number: _____ **Installing Contractor's City of Chula Vista Business License # :** _____

Installing Contractor: _____ **Contractors License # :** _____

Contractor Address: _____ **City:** _____ **State:** _____ **Zip :** _____

Contact Person: _____ **Phone:** _____ **Fax:** _____

Company / Person paying for permit: _____ **Phone:** _____

E-Mail: _____

Fire Permit Number: _____ **Inspector / Area:** _____

Check / Mark √ if applicable, indicate quantity, multiply with fee amount and type/write subtotal. Add subtotals in TOTAL box.

√	#	Temporary Membrane Structures & Tents	Fee	x Qty	Subtotal $
☐	13.1	Temporary Membrane Structures & Tents [base fee]	$195.00		
☐	13.2	Each additional Temporary Membrane Structures / Tents	$65.00		

1. To erect, construct, or operate a tent or air-supported temporary membrane structure >400 sq ft.
2. All line items are additive to the base fee. Base fee includes the first structure, tent or canopy.
3. Fees are established herein for permits that are submitted solely/directly to the Fire Department.

TOTAL: _____

REMIT TO:

Chula Vista Fire Department ● Fire Prevention Division
276 Fourth Avenue ● Building 300, Suite B-143 ● Chula Vista CA 91910 ● (619) 691-5029 ● fax (619) 691-5204

OFFICIAL USE:

Deposit Account # 15900-3743 (2121) Accepted by: _____ Date: _____