Nevada State Fire Marshal

107 Jacobsen Way Carson City, NV 89711 (775) 684-7531 sfmplans@dps.state.nv.us

SPECIAL EVENT AND OUTDOOR ACTIVITY PERMIT APPLICATION

(14-day minimum lead time)

ALL APPLICANTS MUST HAVE SITE PLANS ATTACHED

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Amusement Building (IFC 105.6.2)	k all that apply.	
(\$38.50 Plan Review + \$83.50 Inspection =)	Open Burning (IFC 105.6.32)	
Carnivals And Fairs (IFC 105.6.4)		
(\$38.50 Plan Review + \$83.50 Inspection =)	Open Flames And Candles (IFC 105.6.34)	
Exhibition And Trade Shows (105.6.13) (Sq footage	Outdoor Assembly Event Exceeding 1000 In Attendance (IFC 105.6.36)	
# Of participants)	(\$38.50 Plan Review + \$83.50 Inspection =)	
(\$38.50 Plan Review + \$83.50 Inspection =)	Temporary Membrane Structures And Tents More Than 400 Square Feet	
Mobile Food Preparation Vehicles (105.6.30) (per vehicle)	(IFC 105.6.7)	
(Inspection Per 5 Vehicles x =)	(Inspection Per 5 Tents x =)	
PERMIT INF	FORMATION	
Name of Venue/Event:	# Of Security Personnel:	
Event Address & Specific Location:	Event Start And Finish Dates: to	
Type Of Event:	Event Start And Finish Times: to	
		
# Of Participants Including Staff:		
ADDUCANT	CUECKLICT	
APPLICANT	T CHECK LIST	
Site Plan/Floor Plan:		
Venue dimensions	Seating arrangements and capacities	
Event organizer and contact information.	 Displays and storage areas. 	
 Exits and fire extinguishers. 	 Generator locations with fencing/guards 	
 Emergency access roads (20' minimum) 	 Fencing to exits and egress routes. 	
 Tents/booth/canopy locations and dimensions 	Vehicle parking	
Cooking operations	 Emergency vehicle parking and response routes 	
Certificate of insurance		
Flame certificate (must meet flame propagation criteria of NFPA 701)		
Security Personnel: trained crowd managers shall be provided for events with	more than 1000 people expected.	
APPLICANT	INFORMATION	
Responsible Party	Email & Phone #	
Applicant name and Title (print)	Signature	

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Operational fee schedule as of 01/15/2023

Grand Total Per Checked Boxes:

You may pay by mailing in a check, money order, or by filling out our one time payment credit card authorization form

which can be mailed or emailed to us (information listed at the top of the page).

	FOR OFFICIAL USE ONLY:	Date:
Amount Rec'd:	Inspector Assigned:	
	Notes:	
	Notes.	