



Stockton Fire Department • Fire Prevention Division
 345 N. El Dorado Street, Stockton, CA 95202
 (209) 937-8271 • Fax (209) 937-8893

ONE TIME FIRE PERMIT INSPECTION APPLICATION

Application is hereby made for a per event/one time fire permit as required by the Stockton Municipal Code.

APPLICANT COMPLETE THIS SECTION

Application Date: _____ Event Location: City County

Describe Type of Event _____

Event Address _____ Suite _____ Zip _____

Applicant or Business Name _____

IF APPLICABLE: Stockton Business License # _____ Expiration Date _____

Applicant's Address _____ Suite _____ Zip _____

Contact Person _____ Contact Phone _____

APPLICANTS - Place a check next to permit you are applying for:

<input checked="" type="checkbox"/> Type of Permit	<input checked="" type="checkbox"/> Type of Permit
<input type="checkbox"/> Asbestos Removal - per event/one time permit	<input type="checkbox"/> Liquid/gas Fueled Vehicles or Equipment in Assembly Buildings - per event/one time permit
<input type="checkbox"/> Bowling Alley-pin/alley refinishing - per event/one time permit	<input type="checkbox"/> Mall - used as a Place of Assembly - per event/one time permit
<input type="checkbox"/> Candles & Open Flames in Assembly Areas - per event/one time permit	<input type="checkbox"/> Open Burning - per event/one time permit
<input type="checkbox"/> Carnivals & Fairs - per event/one time permit	<input type="checkbox"/> Parade with Floats, per float - per event/one time permit
<input type="checkbox"/> Installation of underground tanks - per event/one time permit	<input type="checkbox"/> Tent - Short term 1 month or less - per event/one time permit
<input type="checkbox"/> Removal of commercial underground tank - per event/one time permit	<input type="checkbox"/> Christmas Trees; when placed in public building - per event/one time permit
<input type="checkbox"/> Tank lining of above/underground tanks - per event/one time permit	<input type="checkbox"/> OTHER - per event/one time permit (explain)
<input type="checkbox"/> Fumigation and/or Thermal Insecticidal Fogging - per event/one time permit	

ALL APPLICANTS - READ AND SIGN - ALL INFORMATION IS SUBJECT TO VERIFICATION
*I have read this application and know the contents thereof and attest that the same is true and correct.
 I further acknowledge that the City of Stockton has adopted the Fire Code, and the amendments thereof,
 and use of the permit being applied for will conform to accepted standards.*

APPLICANT SIGNATURE _____ DATE _____

BELOW FOR OFFICE USE ONLY

PERMIT NUMBER	INSPECTION PERMIT TYPE (one time permit)	FEE

Issued by: _____ Date Issued: _____	Check # _____ Pay Code: 5A \$ _____ R6 \$ _____
--	---

INSPECTION RESULTS: _____

INSPECTED BY: _____ DATE _____