

## Fire & Health Permit Form

Company Name:  Tent Dimensions:  Will the tent be enclosed or have walls (check one)? Y N  Will your tent come from an outside vendor (check one)? Y N	Contact Name:  Booth #:  How many walls on the tent?  Will you be cooking inside your exhibit space (check one)? Y N	
		What sort of cooking equipment will be used?
		What type of food/drinks will be served? Please list all.
		Whom will you be serving these items?
How do you plan on serving these items (on a plate, in a cup, etc)?		
Will there be flammable liquids in your area (check one)? Y N		
Will you be using a generator? If so, what type of generator?		