Merrimack Fire Department
Office of the Fire Marshal
Bureau of Fire Prevention
Outdoor Festivals & Special Events Permit Application
OFM-GEN-06-001

APPROVED APPLICATION MUST BE AVAILABLE ON SITE DURING EVENT.

Date Application Submitted: _________________ Fee Paid: ☐ Yes ☐ No (See Below)
Name of Event: _____________________________________________________________________
Date of Event: ____________________________________________________________________ Expected Attendance: ______________
Time Event Starts: __________________________________________________________________ Time Event Ends: _________________
Event Location: ____________________________________________________________________

Sponsoring Organization:
_________________________________________________________________________________
Contact Name: ___________________________ Email Address: ___________________________
Address: ________________________________ City/State/Zip: ___________________________
Phone Number(s): ___________________________ ______________________________________

Contact Name: ___________________________ Email Address: ___________________________
Address: ________________________________ City/State/Zip: ___________________________
Phone Number(s): ___________________________ ______________________________________

Professional Organizer:
_________________________________________________________________________________
Contact Name: ___________________________ Email Address: ___________________________
Address: ________________________________ City/State/Zip: ___________________________
Phone Number(s): ___________________________ ______________________________________
# SUMMARY OF EVENT

## DESCRIPTION OF EVENT

_________________________________________________________________________________________________
_________________________________________________________________________________________________
_________________________________________________________________________________________________
_________________________________________________________________________________________________

### Date/Time

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<th>Task</th>
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### PERMIT INSPECTIONS FOR SPECIAL EVENT

- Carnival, Carnival with Rides, Fair, Festival, Food Preparation: $100.00 Initial Inspection
- Outside Event with Greater than 200 people: $25.00 Initial Inspection
- Tent(s) 600 square feet and greater (20’x30’) or an accumulation of 1000 square feet or greater covered: $50.00 Initial Inspection each
- Company Outing with greater than 50 people: $25.00 includes all Inspections
- Reinspection (Hazards, Fire Violations, Unsafe Conditions): $50.00 each

### Alcohol

- Will alcohol be served for free?  
  - [ ] YES  
  - [x] NO
- Will alcohol be sold?  
  - [ ] YES  
  - [ ] NO

What kind of alcohol will be served?  
__________________________________________

Hours during alcohol will be served: From _____am/pm To _____am/pm

Days alcohol will be served (circle all that apply):  Sunday Monday Tuesday Wednesday Thursday Friday

### OTHER FORM WHICH MAY BE REQUIRED BY LAW

- NH State Liquor Commission Affidavit
- State of NH Liquor Commission License Application
- State of NH Liquor Commission Report of Investigation
- Town of Merrimack NH Special Events Form for the sale of alcoholic beverages
1. Are you installing, bring in or constructing any structures, including buildings, climbing structures, etc.?  ☐YES  ☐NO.

If yes, please show structures on a site plan. Also, please describe type, size and number of structures. Plans may be required for review.

2. Are you installing any tents or canopies?  ☐YES  ☐NO

2. Canopy / Tent Size: _____________________ 8. Canopy / Tent Size: _____________________
4. Canopy / Tent Size: _____________________ 10 Canopy / Tent Size: _____________________
5. Canopy / Tent Size: _____________________ 11 Canopy / Tent Size: _____________________
6. Canopy / Tent Size: _____________________ 12 Canopy / Tent Size: _____________________

If yes, please show a drawing of all tents and/or canopies including dimensions on the site plan.

Please provide the following information of the person or company responsible for installing the stage structure, or entertainment device:

Name: ______________________________________________________________
Office Phone Number: _________________________________________________
Cellular Phone Number: ________________________________________________
Mailing Address: ______________________________________________________

3. Are you installing any stages or platforms of any type?  ☐YES  ☐NO

If yes, please show locations and dimensions on the site plan.

Any stages greater than 30” above grade are required to meet structural, guardrail, stairway and accessibility requirements and the following must also be provided for review:

Please provide the following information of the person or company responsible for installing the stage structure, or entertainment device:

Name: ______________________________________________________________
Office Phone Number: _________________________________________________
Cellular Phone Number: ________________________________________________
Mailing Address: ______________________________________________________
4. **Are you installing any grandstands, bleachers, or folding or telescoping seating?** □YES □NO

If yes, please show locations and dimensions on the site plan (Attachment "B").

Any grandstands, bleachers and/or folding or telescoping seating greater than 30” above grade is required to meet structural, accessibility, guardrail and handrail requirements and also submit the following for review:

**Please provide the following information of the person or company responsible for installing the structure, or device:**

Name: ______________________________________________________________

Office Phone Number: _________________________________________________

Cellular Phone Number: ________________________________________________

Mailing Address: ______________________________________________________

5. **Do you plan to have any sound amplification?** □YES □NO

   _____ Music
   _____ Other, please describe

If yes please note the dates and times: ______________________________

**Please provide the following information of the person or company responsible for installing the tent, structure, or entertainment device:**

Name: ______________________________________________________________

Office Phone Number: _________________________________________________

Cellular Phone Number: ________________________________________________

Mailing Address: ______________________________________________________

6. **Is electrical power required (for sound amplification, lighting, etc)?** □YES □NO

If yes, please show items on the site plan and describe how power is to be provided.

Additional review may be required:

   _____ Portable generator
   _____ PSNH temporary power service
   _____ Other, please describe

**Please provide the following information of the person or company responsible for installing the electrical power or entertainment device:**

NH Lic.Electrician: ____________________________________________________

Office Phone Number: _________________________________________________

Cellular Phone Number: ________________________________________________

Mailing Address: ______________________________________________________
7. **Will food be served at this event?**  
   □ Yes  □ No

   Please provide the following if food will be served:

   List types of equipment used for food service:

   ________________________________________________________________
   ________________________________________________________________
   ________________________________________________________________
   ________________________________________________________________

   List all foods to be served:

   ________________________________________________________________
   ________________________________________________________________
   ________________________________________________________________
   ________________________________________________________________
## BLOCK PARTIES

Required from each neighbor on the block affected by the street closure:

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<th>PRINTED NAME</th>
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