



Modesto Fire Department
FIRE PREVENTION DIVISION

1010 Tenth Street, Suite 3200
Modesto, California 95354
PO Box 642 95353

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**AMUSEMENT BUILDING
PERMIT APPLICATION**

Applicant's Name and Phone Number: _____

Applicant's Driver's License Number and State: _____

Applicant's Permanent Address (not PO Box): _____

Address of Event: _____

Owner of Property/Building and Phone Number: _____

If a permanent building, what is the designed use of the structure being used? (e.g. warehouse, factory, store, auditorium, church, etc.): _____

Date(s) and Hour(s) of Operation: _____

Briefly summarize activities in the Amusement Building and in the immediate surrounding area.

- See Amusement Building Guidelines for more information.
- The complete permit application package shall be submitted at least 6 weekdays (excluding holidays) before the site inspection date entered below.
- A site inspection is required. Specify day of the week, date, and time site will be ready for inspection:

_____ / _____
day of the week date time

- An afterhours inspection fee will be charged if an inspection is needed outside of normal business hours (normal business hours: weekdays 8:00am to 5:00pm except holidays).
- Provide a drawn-to-scale site diagram and a floor plan showing all details called for in the Amusement Building Guidelines.
- In a typed narrative, address those individual requirements detailed in the Amusement Building Guidelines that are not included on the site diagram or floor plan. In other words, if you feel some requirement does not apply to you explain why "up front" in the narrative so that we do not have to call you to inquire (which would delay your permit). For example, if you are not going to use a generator, or the event will not have a ceiling (i.e. it is open to the sky so does not require fire sprinklers or smoke alarms), say so in the narrative. In your narrative, refer to the letter of the paragraph of the Amusement Building Guidelines being addressed (e.g. A. , B. , C. , etc.).

Applicant's Signature: _____ Date: _____