Event Operating Permit Application

Environmental Health & Safety Office	Phone: 386-7997	Fax: 386-7960
Title and nature of Event:		·
Name of Department Requesting Permit:		
Contact Info. Name, Number, E-mail:		· · · · · · · · · · · · · · · · · · ·
Building and Room / Area where event will be held:		
Event Details:		
Event Duration from Date/Time:	To Date/Time: _	
Occupant Load Requested:(E	H&S Dept. will review	for compliance.)
Description of event and all associated activi	ties:	
		Yes / No
Will event require any impairment to buildin	g Fire Alarm system?	
If yes a Fire Watch is required. Please contact	t the Code Compliance	e Mgr. at 386-7997
Submissions:		
Floor Plan Required:		
Submit a detailed floor plan of the event are equipment and furnishings to include any Stage, ligh and standing room areas. Submit any other pertiner flags are used please submit flame retardant certific	nt/sound boards, Light nt details. If backdrops	ing, seating areas
Submit Any Contracts to be issued before signature	for review. (if applicat	ole)
PLEASE NOTE:		
Event Staff must be fully trained in the Building's En	nergency Evacuation a	nd Fire Safety Plan
Max Occupancy for event will be determined by sub main entrance / exit. All exits must be clearly marke		-

USE OF PYROTECHNICS OR OPEN FLAME OF ANY KIND INSIDE CAMPUS BUILDINGS IS STRICTLY FORBIDDEN