



Mount Laurel Township
100 Mount Laurel Rd
Mount Laurel, NJ 08054

Date of Event: _____

Address: _____

Department Authorizations

Police Department

Approved ☐ Denied ☐

Comments: _____

Signature _____ Date _____

Fire Department

Approved ☐ Denied ☐

Comments: _____

Signature _____ Date _____

Community Development

Approved ☐ Denied ☐

Comments: _____

Signature _____ Date _____

Zoning

Approved ☐ Denied ☐

Comments: _____

Signature _____ Date _____



MOUNT LAUREL TOWNSHIP

Parks and Recreation

100 MOUNT LAUREL ROAD

MOUNT LAUREL, NEW JERSEY 08054

EMAIL: shigareda@mountlaurel.com

One Day Event Permit

Event Organizer Contact Information:

- a) **Contact Name:** _____
- b) **Organization Name:** _____
- c) **Organization Address:** _____
- d) **Phone:** _____
- e) **Email:** _____

Special Event Details:

- a) **Event Name:** _____
- b) **Description:** _____
- c) **Admission Charge:** _____
- d) **Location of Event:** _____
- e) **Event times & date:** _____
 - a. **Start:** _____
 - b. **End:** _____
- f) **Number of people expected in attendance:** _____
- g) **Temporary Structures (tents, canopies) provide sizes:** _____
- h) **Waste Management: (plan to dispose of garbage):** _____
- i) **What cooking devices will be used:** _____
- j) **Will food trucks be in attendance, if yes specify:** _____
- k) **Attach map/layout of event: The plan should be clearly presented, drawn to scale.
Provide date it was created.**
- l) **Will any road ways be blocked, if yes which roads:** _____
- m) **Have you attached Liability Insurance? Yes_____ No_____**



SPECIAL EVENT APPLICATION

The Mount Laurel Fire Department Fire Prevention Division is dedicated to the safety of all citizens and to the efficiency of well-planned and executed events. As a host of Public functions, you are also well aware that safety must remain foremost in your efforts. We look forward to working with you to ensure safety for your patrons, customers and employees. We believe communication is the key to successful relationships, and hope that the following information, which addresses our common goal of public safety through permits and floor plan approvals, is one component of that communication.

Event Coordinators Responsibilities

Collects signed applications and payments from vendors and makes appointment with the Fire Marshal's office — a minimum of 2 weeks before the event — to pull all permits for event.

Distribute and collect necessary information (permits, etc.) to event vendors

Relays all enclosed information to any and all personnel involved with the event

Site Plan Approval/Emergency Vehicle Access—Specifically for events that close streets must allow for access of emergency vehicles from adjacent alleys and/or through the streets of the event site.

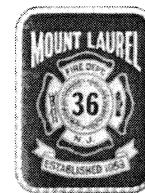
Listed below are examples of on-site requirements. A final determination of your exact requirements will be explained to you through this process:

- Appropriate number and type of fire extinguishers with inspection tag or purchase receipt from within the last 12 months.
- Combustible wall covering may not exceed 10% of any wall or egress-path. An exception is that in a protected (sprinklered) auditorium, the covering may not exceed 50%.
- No cooking is permitted under any tents.
- Extension cords shall be outdoor rated and must not be laying in an area where water may accumulate or they pose a tripping hazard.
- All booths, tents and canopies must be of approved material and be flame resistant and must have a certificate of flame resistance to accompany permit application.
- No fuel may be refilled during the event while the public is present.
- No smoking in any tent, canopy or adjacent area where hay, straw, sawdust or other combustible materials are stored. "No Smoking" signs shall be conspicuously posted.
- Only cylinders that are hooked-up for use shall be allowed at each station.
- All temporary wiring needs a permit from the Township building department. 856-234-9686.
- All equipment shall have U.L. approval.
- All amusement rides shall have NJ approval.
- Fire permits must be on-site and in possession of the vendor.

This form must be completed and signed by a representative of the business participating in a special event. It will be returned to the event organizer upon approval. A Mount Laurel Fire Department Permit will not be issued if this form is not completed, signed and returned. Permits are issued from 8 a.m. to 4 p.m. Monday – Friday.

MOUNT LAUREL FIRE DEPARTMENT

"Office of the Fire Marshal"



Business Name:	
Business Address:	
Business Representative:	
Business Phone:	Business Fax:
E-Mail:	
Event Name:	
Event Description:	
Event Date (s):	Time:
Event Place:	
Number of attendee's expected:	

MUST SUBMIT A NARRATIVE EXPLAINING THE DETAILS ABOUT THE EVENT. IN THE NARRATIVE YOU MUST EXPLAIN IN DETAIL ANY SPECIAL EQUIPMENT YOU WILL BE USING. BELOW ARE A FEW OTHER THING YOU MAY NEED TO INCLUDE IN YOUR NARRATIVE:

Will you be using any tents, canopies or membrane structures?

- If so:
- How many tents will you be using?
 - What is the size or the dimensions of you tent or tents?
 - How are the tents going to be secured in place?
 - Is the tent(s) Flame retardant, and if so you must submit flame retardant certification with proper Id# for the tent being used.
 - On your diagram, you must show where your tent will be located. You must show where the exits will be located.
 - Are there any special devices being used under the tent (any cooking devices?)?
 - How many people will occupy the tent?
 - If located in a parking lot, show on your diagram where vehicle barrier protection will be located around the tent.

Will you be using any special props, scenery, and/or decorations in you event?

- If so:
- What are your props, scenery, and/or decorations going to be made out of?
 - How big, or what are the dimensions of the props, scenery, and or decorations you will be using?
 - Are they flame retardant? Or have they been treated to be flame retardant?
 - If treated please submit chemical spec sheet along with manufacture specifications on how to properly apply the chemical.

Will you be serving food?

- If so:
- What type of devices will you be using to cook and/or serve food?
 - On you diagram, please show the location where these devices will be.
 - If using outside venders, what vender's will you be using?
 - Show where your vender(s) will be located on you diagram.
 - Explain what devices your vender will be using.

Will you be using any amusements rides and/or inflatable structures or play areas?

- If so:
- Describe in detail what you will be using?
 - What vendor or Amusement Company you will be using?
 - Do they have their NJ State Amusement Licenses and permits?
 - What is there Licenses number and permit number?
 - Have the amusement or inflatable structure or play area been approved by the State of NJ.

Will you be using any open flames, pyrotechnics, and or flame producing devices?

- If so:
- List and describe what you will be using? (Fireworks, candles, heaters, bon-fires)
 - Submit a copy of Manufactures owner's manual for all appliances being used.
 - Expand in great detail how these devices will be used.
 - Show in detail on your diagram where these devices will be used.

[illegible]

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"Office of the Fire Marshal"

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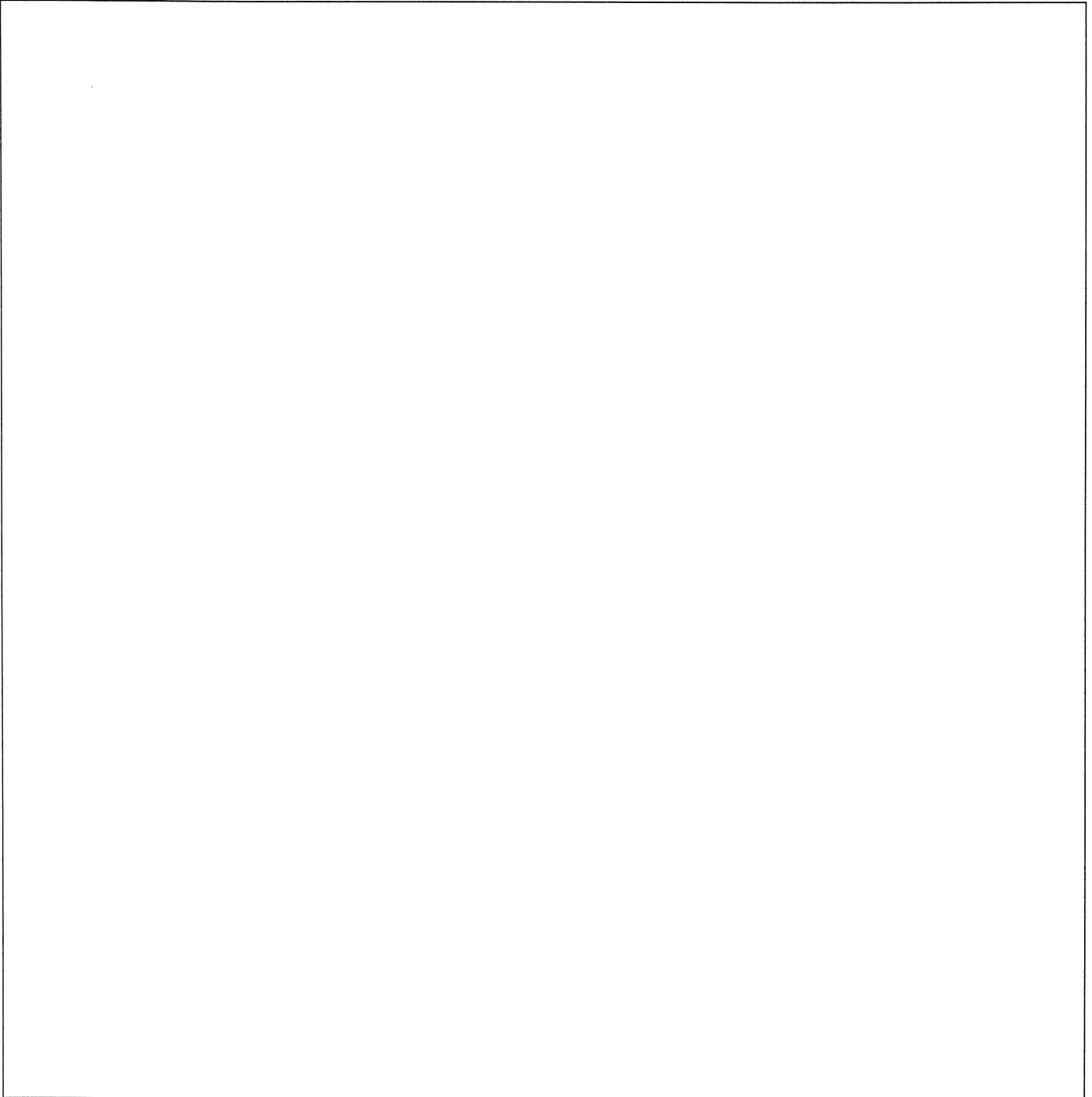
MOUNT LAUREL FIRE DEPARTMENT

"Office of the Fire Marshal"



Please use the area below to draw a diagram of the event. In your diagram show locations of all special devices, chairs, tables, exits, property lines, fire lanes, access to fire protection devices, fire extinguisher locations, parking, stages, tents, displays, props, vendor locations, and any other items that are being used in your event. Feel free to attach multiple diagrams to this application pending on the size of the event and various locations within the building or on the property.

MOUNT LAUREL FIRE DEPARTMENT
"Office of the Fire Marshal"



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"Office of the Fire Marshal"



I HAVE READ AND UNDERSTAND THE MOUNT LAUREL FIRE DEPARTMENT SPECIAL EVENT VENDOR REQUIREMENTS. I ALSO UNDERSTAND THAT A PRE-EVENT INSPECTION MAY BE REQUIRED AND THAT IF I DO NOT COMPLY WITH THE NEW JERSEY FIRE CODE AND SPECIAL EVENT REQUIREMENTS, MY PERMIT MAY BE REVOKED WITHOUT REFUND.

Signature of Applicant:	
Printed name of Applicant:	
Phone number of Applicant:	
E-mail address of Applicant:	

THE BELOW BOXES ARE FOR PTO ORGANIZATIONS ONLY

Signature of Principal:			
Printed name of Principal:			
PTO contact #1 name:		Cell #:	
PTO contact #2 name:		Cell #:	
PTO contact #3 name:		Cell #:	

Please be sure to print this form for your records.

***This form may be e-mailed to fm@mlfd.org or
may be faxed to 856-234-3756.***



FIRE DEPARTMENT USE ONLY BELOW THIS LINE

Reviewed by: _____ Date: ____/____/____

Meeting date: ____/____/____, Meeting time: ____:____, Location: _____

Application for a School PTO? Y N Principal Approval? Y N

Does applicant or business owe any outstanding fees? Y N

Is the application: (Approved or Denied) Approved By: _____

Reason for Denial: _____

Permits required:

Type 1: \$54.00: _____

Type 2: \$214.00: _____

Type 3: \$427.00 _____

Type 4: \$641.00 _____

Special notes: _____
