

DEVENS ENTERPRISE COMMISSION

33 Andrews Parkway, Devens, MA 01434
978-772-8831 x3338 Fax 978-772-1529

TOWN OF DEVENS

**TEMPORARY TENT PERMIT
SIZE - 10' X 12' OR LARGER**

PERMIT NO. _____

DEC No. _____

APPLICATION DATE: _____

Fee \$50.00 / per tent

Note: Fill out application form completely and legibly.

PROPERTY OWNER _____

TENT INSTALLER _____

ADDRESS _____

ADDRESS _____

TOWN/STATE _____

TOWN/STATE _____

PHONE _____

PHONE _____

FAX _____

FAX _____

LOCATION / STREET/ FIELD: _____

SCOPE OF WORK ERECT TEMPORARY TENT (S) NUMBER OF TENTS _____

DATES: FROM _____ TO _____

FLAME RETARDANT CERTIFICATE: ATTACH TO THIS APPLICATION

Explain event or use of tents : _____

Applicant Signature