

**The City of Saline Building Department  
 APPLICATION FOR A TENT PERMIT  
 100 N. Harris  
 SALINE, MI. 48176  
 Phone 734-429-8296 Fax 734-429-5280**

**Tent(s) Site Address:** \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

**Property Owner's Name:** \_\_\_\_\_  
 Owner's Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
 Telephone #: \_\_\_\_\_ Alternate Phone Number: \_\_\_\_\_

**Name of person(s)/group hosting event:** \_\_\_\_\_  
 Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
 Telephone #: \_\_\_\_\_ Alternate Phone Number: \_\_\_\_\_

**Number of tents:** \_\_\_\_\_

**Location on property (please submit an 8 1/2 X 11 sketch where tents will be set up)**

**Size of tent(s):** \_\_\_\_\_  
 \_\_\_\_\_

**Purpose of tent(s):** \_\_\_\_\_  
 \_\_\_\_\_

**Dates tent(s) will be set up for:** \_\_\_\_\_  
 \_\_\_\_\_

**\*If zoning review is required there is an additional fee of \$25.00**  
**\*If a Fire/Safety inspection is needed there is an additional fee of \$20.00**

**(If electricity will be ran to the tent an electrical permit is required)**

<b>Number of Tents:</b>	<b>@ \$15.00 each</b>	<b>\$</b>
<b>Is Zoning Review Required: Y / N</b>	<b>@ \$25.00</b>	<b>\$</b>
<b>Is a Fire/Safety Inspection Needed: Y / N</b>	<b>@ \$20.00</b>	<b>\$</b>
		<b>Total:</b>

Signature of Owner: \_\_\_\_\_ Application Date: \_\_\_\_\_