



Riverside County Fire Department

Office of the Fire Marshal

City of Lake Elsinore

130 S. Main St. Lake Elsinore, California 92530

Lakeelsinoreofm@lake-elsinore.org

(951) 674-3124 Ext. 250



SPECIAL EVENT PERMIT APPLICATION

Permit Number: _____	<i>Office Use Only</i>
Assessor Parcel # (APN) _____	
<u>EVENT INFORMATION</u>	
Event Name: _____	
Address: _____	<i>Inspection Request Received</i>
City / Zip: _____	
Event Contact: _____ Phone Number: _____	
Type of Event: _____ Total # of people: _____	
Event Date(s): _____ Time Start: _____ Time End: _____	
<i>Additional Notes:</i>	
<u>APPLICANT / SPONSORING ORGANIZATION INFORMATION</u>	
Company Name: _____	Applicant Name: _____
Address: _____	Phone Number: _____
City / Zip: _____	Email: _____
Mark all that apply:	
Food & Beverage:	
<input type="checkbox"/> Catered On-Site / Off-Site <input type="checkbox"/> Barbeques / Grills <input type="checkbox"/> Deep Fryers <input type="checkbox"/> Ranges <input type="checkbox"/> Woks	
Tents / Canopies:	
Tents / Canopies - Under 400 square feet: _____ Over 400 square feet: _____ Over 700 square feet: _____	
Copy of fire retardant certification provided: <input type="checkbox"/> Yes <input type="checkbox"/> No	
Booths: Number of booths: _____ Cooking: <input type="checkbox"/> Yes <input type="checkbox"/> No	
Generators: Quantity: _____ Refuel Required: <input type="checkbox"/> Yes <input type="checkbox"/> No	
Open Flame / Pyro: <input type="checkbox"/> Yes <input type="checkbox"/> No *Form 21 – Special Effects may be required	
OFFICE USE ONLY	
Received By: _____	Fee Amount: _____ Date: _____
Permit Review: Approved Corrections Reviewed by: _____	Date: _____
Standby / Safety Inspection: Required <input type="checkbox"/> Yes <input type="checkbox"/> No	Person Assigned: _____
Final Approval: <input type="checkbox"/> Granted <input type="checkbox"/> Denied	
Sign: _____	Date: _____



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REQUIRED WITH THIS APPLICATION:

The following plans shall be submitted in a clear and legible manner on an 11" x 17" format; larger maps or blueprints may be necessary.

Site Map: Indicate locations of event activities, tents and/or booths, including distance from other temporary structures, buildings, property lines or booths. Please show location of generators, vehicle parking areas, fire lanes and roadways.

Floor Plan: Indicate occupancy load calculations, exit locations and dimensions, exit doors/curtains, placement of exit signs, portable fire extinguishers-type rating, "No Smoking" signs, if cooking/open flames/candles/ sternos/ heaters/ number of tables and chairs, table dimensions, chair spacing, chair bonding, aisle locations, length and width, emergency lighting, flooring material, stages.

Parking and Security Plan: Provide a copy to verify fire access and abilities.

Additional Info:

Emergency Medical Service provided at this event? ☐ Yes ☐ No

Level of Service(s): _____

CONDITIONS OF APPROVAL

- For events that will have more than 200 attendees, applications shall be submitted a minimum of sixty (60) days in advance. Fire application and inspections are charged on an hourly inspection fee basis starting at \$406.34. Fees shall be submitted a minimum of ten (10) business prior to date of event.
- A pre-event inspection is required prior to the display or event where large tents, generators and/or cooking is proposed.
- Provide a signed letter from Property Owner allowing permission to use property for the event.

I CERTIFY THAT I HAVE READ THE ABOVE STATEMENT OF CONDITIONS OF APPROVAL AND THAT ALL INFORMATION SUBMITTED IS CORRECT. I AGREE TO COMPLY WITH ALL LOCAL LAWS RELATED TO FIRE PREVENTION, AND TO RULES AND REGULATIONS ADOPTED BY THE CALIFORNIA STATE FIRE MARSHAL. I HEREBY AUTHORIZE A REPRESENTATIVE OF THE FIRE DEPARTMENT TO ENTER UPON THE ABOVE-MENTIONED EVENT PREMISES FOR INSPECTION PURPOSES.

Applicant's Printed Name: _____ Date: _____

Applicant's Signature: _____