

FIRE PREVENTION DIVISION

480 North Canal Street South San Francisco, CA 94080 Office: 650.829.6645 Fax: 650.829.3954

SPECIAL ACTIVITY PERMIT APPLICATION

Site Address	D	ate				
APN/Parcel #	P	ermit #				
Type of Permit	Hot work Tree left Carnival/Fairs Pyrote Tents/Canopies Title 1 Other:	echnic Dis	splay		Flame alt Kettle ant	
	Starting Date and Time			Ending Date and Time		
Duration of Activity						
	Name			Telephone		
Property Owner						
	Street		City	State	Zip	
Address						
	Name			Telephone		
Contractor						
	Street		City	State	Zip	
Address						
	Name			Telephone		
Applicant						
	Street		City	State	Zip	
Address						
	Name			24 Hour-Tele	phone	
Emergency Contact						

Description of Activity/Event:

Cooking On-site:	No 🗆	Yes 🗆 1	f yes, details:	
Open Flame On-site:	No 🗌	Yes 🗆	If yes, details: _	
Interior Decorations:	No 🗆	Yes 🗆	If yes, details: _	
Portable Heating Units:	No 🗆	Yes 🗆	If yes, details: _	
Electrical Power: *If generator, include location	No 🛛 n on-site a	Yes 🛛 nd event ma	If yes, details: _ ^{ps.}	

Site Map:

Please provide a Google aerial or street view or an accurate sketch that displays the following:

- Compass orientation
- Street and nearest cross street
- Location of nearest fire hydrant
- Driveways/access points to property
- Location of the special activity

Event Layout:

Please provide an accurate sketch that displays the following:

- Tables/Seating/Display/Ride Layout
- Location of Exits (battery back-up emergency exit sign/lighted unit required)
- Location of fire extinguishers (maximum 75' travel distance)
- Location of "No Smoking" signs
- Location of "Maximum Occupancy" sign
- Location of heating devices
- Location of any open flame devices
- Location of any electrical generator
- Location of food preparation or staging area

Property Owner
I hereby affirm that I am exempt from the requirement for licensure and/or qualification as required by the Business and Professions Code and any other applicable codes or regulations that govern this special activity
Owner's Signature: Date
Contractor
I hereby affirm that I am a licensed and/or qualified as required by the Business and Professions Code and any other applicable codes or regulations that govern this special activity, and my license or registration with the appropriate regulatory authority is in full force and effect.
Contractor's State. License. No: City Business License. No:
Contractor's Signature: Date:
Worker's Compensation
I hereby affirm that I have a certificate of consent to self-insure, or a certificate of Worker's Compensation Insurance, or a certified copy thereof.
Policy No: Company: (Certified copy is hereby furnished)
I certify that in the performance of this special activity for which the permit is issued, I shall not employ any person in any manner so as to become subject to Worker's Compensation Laws of California
Applicant Signature: Date:
Applicant
General
I certify that I have read this application and state that the above information is correct and understand that this application does not constitute permission to conduct the proposed activities described above.
I hereby authorize representatives of this city to enter upon the above-mentioned property for inspection purposes.
I understand that this permit, if granted, constitutes permission to maintain, store, use or handle materials, or to conduct processes, or activities which may produce conditions hazardous to life or property, or to install equipment used in connection with such activities. Such permission shall not be construed as authority to violate, cancel or set aside any of the provisions of the California Fire Code. This permit shall not take the place of any license or other permits required by law.

Expiration:

I understand that this permit shall continue until revoked or expire on the date listed. Permits shall not be transferable and any change in use, occupancy, operation or ownership shall require a new permit.

Compliance:

_____ I understand that the permit applicants and the applicant's agents and employees shall carry out the proposed activity in compliance with the California Fire Code and other laws or regulations applicable thereto, whether specified or not, and in complete accordance with approved plans and specifications. Permits which purport to sanction a violation of this code or any applicable law or regulation shall be void and approvals of plans and specifications in this issuance of such permits shall likewise be void.

Retention of Permits:

I understand that permits shall be kept on the premises designated therein at all times and shall be posted in a conspicuous location on the premises or shall be kept on the premises in a location designated by the Fire Marshal. Permits shall be subject to inspection at all times by an officer of the fire or police department or other persons authorized by the Fire Chief

Revocation of Permits:

_ I understand that the Fire Chief or designated representative is authorized to suspend or revoke a permit when it is determined that:

- 1. The permit has been issued by a person other than the person to whom the permit was issued,
- 2. The permit has been used for a location other than that for which it was issued,
- 3. Any of the conditions or limitations set forth in the permit have been violated,
- 4. The permittee failed, refused, or neglected to comply with orders or notices duly served in accordance with the provisions of this the California Fire Code or any applicable law or regulation within the time provided therein,

Date

- 5. There has been a false statement or misrepresentation as to a material fact in the application or plans on which the permit or application was based, or
- 6. The permit was issued in error or in violation of an ordinance, regulation or the California Fire Code.

Applicant Signature:
Applicant Signature: