

# Westport Fire Marshal's Office Special Event Permit Application

Event location:		
Date(s) of event:	Start time:	End time:
Type of event:		
Permit applicant / Event organiz	zer:	
Permit applicant address:		
Email address:	Phone number:	
Organization name:		
Organization address:		
Email address:		
Contact on site:	Cell number of or	n-site contact:
Number of Persons Expected to	attend:	
Will There be Decorations*	Yes No (If yes please describe in	n detail on a separate sheet of paper)
Will There Be on Site Cooking	Yes No Type of fuel:	
Will You Be Erecting a Tent	Yes No (If yes, building permit r	may be required)
Will Special Effects Be Used	Yes No (If yes, then a special ef	fects permit is required by State Fire Marshal)
*For All Events		
includes seating plan, stages, da	iled drawing shall be submitted with space ance floors, etc., any and all decorations. Decorations, table centerpieces, live and	ecorations include but are not limited to,
of the event. Applicant declares all	the terms set forth in this application and under information submitted on this application is acc n of permits, inspections and compliance with	• •
application is submitted. Unauthor Applicant, organizations and memb Westport Fire Department and will	notify the Westport Fire Marshal's Office of an ized changes may lead to denial or revocation of bers thereof, agrees to abide by all policies, proclalso comply with all local, state and federal rege event and that changes may be ordered.	f the permit. On behalf of the above Permit sedures and instructions set forth or provided by the
Permit holder name (Print):		
Signature:	Date:	



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#### FIRE WATCH AGREEMENT

Pursuant to the 2022 Connecticut Fire Safety Code, a fire watch may be required, whereas in the opinion of the fire code official, it is essential for public safety. The responsible party shall be responsible for payment upon completion of the service. Invoices for fire watch services will be sent directly to the responsible party listed below. Upon receipt of the invoice, payment shall be made within 30 days, via check addressed to "Town of Westport".

Terms of the fire watch include a 4-hour minimum beginning ½ hour before the start of the event and ending ½ hour after the event. All work performed after 4 hours shall be paid in ½ hour increments. All work performed over 8 hours shall be paid at 1½ times outside hourly rate. All work performed between 10 pm and 7 am shall be paid 1½ times outside job hourly rate. All work performed on New Year's Eve, New Year's Day, Memorial Day, Independence Day, Labor Day, Thanksgiving Day, Christmas Eve, and Christmas Day shall be paid 1½ outside job hourly rate. Outside job hourly rates listed below are subject to the collective bargaining agreement with the Town of Westport.

Firefighter/LT: 87.19 1½ Firefighter/LT: 130.79 DFM/Captain: 99.35 1½ DFM/Captain: 149.03

### **Cancellation Policy**

The following are the terms of the cancellation policy. The responsible party shall contact the Fire Marshal's Office at 203-341-5020 during normal business hours (M-F 830-430). For after-hours cancellations, the party responsible shall contact fire dispatch at 203-341-5010.

No Charge

Four (4) hour minimum/ PP

Responsible Party contact information:		
Name (print):		
Phone:		
Email address:		
Responsible Party address:		
Signature of Responsible Party	Date:	

## **OFFICE USE ONLY**

More than twenty-four (4) hours prior to the scheduled start time.

Twenty-four (24) hours or less of the scheduled start time.

Inspection Required No Yes Inspection Date:

Fire Protection / Fire Watch Required No Yes Approved By: