

CITY OF BREA FIRE DEPARTMENT

Fire Prevention Division

SPECIAL EVENT PERMIT APPLICATION

This form shall be submitted a minimum of two weeks prior to event with a set of plans.

Name of Event:	
Date:	
Address/Location:	
Time:	
Move in Date:	
Event Sponsor:	
Contact Person:	
Address:	
City, State & Zip:	
Telephone Number:Cell Phone:	
E-mail:	
Web Site:	
Event Decorator:	
Contact Person:	
Address:	
City, State & Zip:	
Telephone Number:	
E-mail:	
Web Site:	
Largest Estimated Daily Attendance:	
Street Closure Yes No TUP Yes No	
Event Type: Public Private Trade Other	
Dining: Yes No	
Cooking on Site: Yes No If yes, check one: Charcoal/Wood Propane	
Contact the Health Department for permitting requirements at 714-433-6000 if the event is open to the public and food will be sold or given away.	
Please briefly describe your event:	
Page 1 of 2	

If using a generator, please describe of generator (brand/wattage/amps):		
he following invent:	tems have special Fire Department regulations and may require a permit. Please check any that may apply to your	
I	☐ Warming Food with Canned Heat	
1	Open Flame Devices – BBQ Grills/ Candles	
_	Flammable or Combustible Liquids Flammable or Compressed Gases	
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	Flammable Decorations	
	Lasers or Special Effects	
	Fireworks	
	Portable Generators	
	Motor Vehicle on Display	
	Tents or Canopies (with or without walls)	
	Inflatable Bounce Houses/Jumpers	
Signe	ed:Date:	
Title		
Thank you for	taking the time to provide us with this information. When you have completed this application, please return it	

Thank you for taking the time to provide us with this information. When you have completed this application, please return it via email, fax or mail to:

Brea Fire Department Prevention Division 1 Civic Center Cir. Brea, CA 92821

Fire Prevention: 714-990-7655

Fax: 714-671-3691

You will be contacted by the inspector in charge of special events from the Fire Prevention Division regarding your event.