



**CITY OF CORONADO**

**DEPARTMENT OF COMMUNITY  
DEVELOPMENT  
BUILDING DIVISION  
1825 STRAND WAY, CORONADO, CA 92118  
(619) 522-7331 / (619) 522-2418 (FAX)  
COMMDEV@CORONADO.CA.US**

HANDOUT  
**110**  
Sept 2019

# TENT/CANOPY PERMIT REQUEST

## Single Event / Private Property

**PURPOSE:** To provide health and safety inspections for tents used for single events on private property.

**AUTHORITY:** City of Coronado Building Official/Fire Marshal

- NOTES:**
1. This request is not a permit and does not authorize the applicant to proceed without a permit.
  2. This request must be received at least one (1) week before the event date. **See exception included in note #8.**
  3. Please provide a general layout of the event site including tent arrangement and tent table/seating layout.
  4. Please provide a Certificate of Flame Retardancy for the tent/canopy materials.
  5. This request can only be used for the event date(s) listed below.
  6. This permit may be obtained via the mail or electronic media however sufficient time must be allowed to process the permit prior to the event.
  7. If the event is on City of Coronado property (including parks and beaches) and you wish to reserve a specific place and time/date, you must contact the Recreation Services Department at (619) 522-2454.  
Alcoholic beverages may not be served on City of Coronado property except at the Community Center banquet rooms and enclosed outdoor patio area.
  8. If the event is on City of Coronado property (including parks and beaches) and you wish to request a waiver of the aforementioned alcoholic beverage restriction, and/or you require additional City of Coronado services (i.e. police, etc.) for your event, in addition to contacting the Recreation Services Department, you must contact the City Manager's Office at (619) 522-7335. Please allow an additional four to six weeks approval/processing time.
  9. The Permit Fee is a flat rate, regardless of size and quantity of tents or canopies.

**DATA:** Please provide the following information in order to process the permit:

1. Applicant: \_\_\_\_\_
2. Address: \_\_\_\_\_
3. Telephone #: \_\_\_\_\_ 4. E-Mail Address: \_\_\_\_\_
5. Event Title: \_\_\_\_\_
6. Describe the activities included in the event: \_\_\_\_\_
7. Event Sponsor: \_\_\_\_\_
8. Event Location: \_\_\_\_\_
9. Date of Event: \_\_\_\_\_ 10. # of Participants: \_\_\_\_\_
11. Set-up Date: \_\_\_\_\_ 12. Strike Date: \_\_\_\_\_
13. Inspection Contact Name & Phone #    Name: \_\_\_\_\_    Phone #: \_\_\_\_\_
14. Inspection Request Date & Time    Date: \_\_\_\_\_    Time: \_\_\_\_\_

**DETERMINATION:** (City staff use only)

1. Permit # \_\_\_\_\_ Date \_\_\_\_\_
2. Noise Permit required     Yes     No    Date Noise Permit Submitted \_\_\_\_\_
3. Inspection required     Yes     No    Date Fire Department notified \_\_\_\_\_