

LOCKHART FIRE RESCUE

OUTDOOR COOK OUT EVENT APPLICATION

Name of Applicant:				
Address:				
Brief description of Event:				
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	Loca	tion of Event		
Address:				
			Private Property (i.e. local business site)	
Phone Located on site or cell phone:				
Additional Designees or Event Officials:				
□ Received Copy of Safety Plan Requirements				
☐ Submitted Approved Safety Plan				
☐ Site Inspection has been performed				

As the permit applicant I have read, understand, and agreed to follow all the above required safety guidelines. I understand that a copy of the permit must be located on the site of the event and that the permit applicant or their designee(s), as stated above shall be available on scene and by phone contact while cooking is taking place.

I also agree to provide a copy of these requirements to each participant and provide a competent adult to complete a regular roving patrol of the event site to assure compliance with these requirements.

(Application may be faxed to (512) 620-0001, however application must be reviewed and permit issued prior to actual Event)

I realize that once the permit is issued that I must still contact the Fire Marshal Office prior to beginning event. I further realize that this permit may be suspended and/or revoked at the discretion of the Fire Marshal or his designee, due to safety violations, precautions or environmental conditions changing into an unsafe situation.

(Signature of Applicant)	(Date)	
Fire Code Official / Designee City of Lockhart	(Date)	
*** Official Use Only *** Approved Not Approved Permit #:		
Notes / Reason:		