CITY OF SOMERSET
Department of Housing, Buildings and Construction

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Temporary Structures
Site Placement Application

NOTE: Indicate the Manufacturer's Model # _____ DOES THIS TENT HAVE KY TENT MODEL APPROVAL? _____

NAME OF PERSON SUBMITTING PLANS_____ PHONE (   )_____-_____

IS THE SITE REVIEW FEE INCLUDED WITH PLANS? ☐ YES ☐ NO

MAILING ADDRESS: _____
NUMBER / STREET, HWY, ROAD or P.O. BOX   CITY   STATE   ZIP CODE

BUSINESS & PROJECT NAME: _____

PROJECT LOCATION: _____
NO./STREET, HWY or ROAD (Please do not indicate P.O. Box or Postal Routes)   CITY   COUNTY

OWNER OR CUSTOMER: _____ PHONE (   ) _____ - _____

MAILING ADDRESS: _____
NUMBER / STREET, HWY, ROAD or P.O. BOX   CITY   STATE   ZIP CODE

MANUFACTURER NAME: _____ PHONE (   ) _____ - _____

MAILING ADDRESS: _____
NUMBER / STREET, HWY, ROAD or P.O. BOX   CITY   STATE   ZIP CODE

DEALER NAME: _____ PHONE (   ) _____ - _____

MAILING ADDRESS: _____
NUMBER / STREET, HWY, ROAD or P.O. BOX   CITY   STATE   ZIP CODE

* * * * * * * * * * * * BUILDING INFORMATION * * * * * * * * * * * *

NUMBER OF TENTS IN THIS SUBMITTAL: _____   **USE OF TENTS** i.e....COOKING, SALES, DANCING, DINING or other (please specify)_____

IF NOT A TENT WHAT TYPE OF TEMPORARY STRUCTURE IS BEING SITED: ____PERFORMANCE STAGE ____ELEVATED FLOOR SYSTEM ____OTHER: _____

TENT / STRUCTURE MEASUREMENTS: _____WIDE BY _____LONG   **TOTAL AREA IN NEW BUILDING OR ADDITION:** _____ SQ FT

WHAT DATES WILL THIS TENT/STRUCTURE BE PLACED ON SITE? _____

SITE PLAN SUBMITTAL CHECKLIST   THE SITE SUBMITTAL SHALL INCLUDE THE FOLLOWING:

☐ Site Plan w/tent location/distances to adjacent buildings and property lines
☐ Anchoring details base on reaction factors
☐ Floor plan including emergency lighting and exit sign locations
☐ Operational manuals per Model Approval
☐ Dates of temporary use
☐ Emergency shutdown procedures due to severe weather including the maximum wind speed before evacuation (not to exceed 75% of designed listed wind speed