Shoreview Community Development Dept
4600 Victoria Street North
Shoreview, Minnesota 55126
651-490-4600 l shoreviewmn.gov

Permit # _____

Date Issued: _____

Tent and membrane structure permit application

Site Address: _____

Tent/membrane structure rental company

Company Name: _____

Contact Person: _____

Address: _____

Phone: _____ Email: _____

Person/business requesting permit

Business Name: _____

Contact Person: _____

Address: _____

Phone: _____ Email: _____

Property owner, if other than person/business requesting permit

Company/Name: _____

Contact Person: _____

Address: _____

Phone: _____ Email: _____

Property use:

☐ Residential ☐ Commercial ☐ Industrial ☐ Institutional ☐ Public

Tent and event information

Type of Event _____ Date Up _____ Date Down _____

Propane heat: Yes ☐ No ☐ Flame-retardant material heat: Yes ☐ No ☐

Required: Site-plan drawing of building and location of tent/membrane structure placement, along with distance measurements to structures.

Signature:

The undersigned acknowledges that this application has been read and that the above is correct and agrees to comply with all the ordinances and laws of the City of Shoreview regulating building construction.

Name: _____ Date _____

For office use:

Date Received _____ By _____

Attachments _____