

CITY OF CHAMPAIGN

APPLICATION FOR TENT PERMIT

LOCATION _____ BUSINESS _____

TENT IS TO BE: _____ ft. wide by _____ ft. long by _____ ft. in height

SET UP DATE: _____ TAKE DOWN DATE: _____

ESTIMATED COST: _____

PURPOSE OF TENT: _____

OWNER OF PROPERTY: _____
(where tent will be set up)

OWNER ADDRESS: _____

OWNER PHONE #: _____

TENT CONTRACTOR: _____ PHONE # _____

APPLICANT'S NAME (Please Print) _____

APPLICANT'S SIGNATURE: _____

ADDRESS: _____ PHONE #: _____

DATE: _____

PLEASE PROVIDE A COPY OF THE TENT RENTAL AGREEMENT. IF APPLYING FOR A TEMPORARY LIQUOR LICENSE, A DIAGRAM OF EXITS LOCATIONS, CHAIR SET UP, ETC. IS REQUIRED BEFORE ISSUANCE OF PERMIT.

AN ELECTRICAL PERMIT MAY ALSO BE REQUIRED.

*****PLEASE NOTE: Placement of tent may not eliminate the required accessible parking spaces.**