



BOXBOROUGH BUILDING DEPARTMENT
29 Middle Road, Boxborough, Massachusetts 01719
Phone: (978) 264-1726

APPLICATION FOR TENT PERMIT

Applicant: _____ Phone _____

Applicant Address: _____

Address where tent(s) will be located: _____

Date for tent set-up: _____ Date for tent break-down: _____

Property Owner's Name _____ Phone _____

Tent to be supplied by _____ Phone _____

Address of Supplier: _____

Tent Size, Description: _____

THE FOLLOWING MUST BE ENCLOSED
PER 780 CMR 3104.0 TEMPORARY STRUCTURES:

- Copy of Tent Supplier's Certificate of Insurance and Worker's Comp Certificate
- Tent Fire Rating Certificate
- Site plan indicating location and information delineating the means of egress
- Check made out to the Town of Boxborough in the amount of \$50.00 /per tent.

APPLICANT'S SIGNATURE _____ DATE: _____

OWNER'S SIGNATURE _____ DATE: _____

TAX COLLECTOR APPROVAL _____ DATE: _____

BUILDING DEPARTMENT APPROVAL _____ DATE: _____
