



PANAMA CITY BEACH FIRE RESCUE INSPECTIONS DIVISION

116 South Arnold Road, Panama City Beach, FL 32413
850-233-5100
beachsidefire@pcbfl.gov

APPLICATION FOR BEACHSIDE FIRE

Application Submittal Date: _____

PERMIT FEE: (PERMIT FEES ARE NON-REFUNDABLE)

- o BEACHSIDE FIRE PERMIT: \$50.00 per fire pit

BEACHSIDE SITE INFORMATION:

Name / Type of Event: _____ Is this part of a special event? Yes No

Date / Time of Event: *Multiple dates are only allowed at the same property location, times must be between 5 pm-12 am*

Date: _____ Date: _____ Date: _____ Date: _____ Date: _____ Date: _____ Date: _____

Time: _____ Time: _____ Time: _____ Time: _____ Time: _____ Time: _____ Time: _____

Upland Address of Burn Site: _____

Property Owner Name: _____ Property Owner Phone Number: _____

Property Owner Address: _____ State: _____ Zip Code: _____

Is this a previously approved site? Yes No

Site Plan Attached: Yes No *Site plan should show location of pit and distance from nesting sites, structures, dunes, etc.*

Property Permission Attached: Yes No

Size of Event / Number of People Attending: _____

Fire Control Equipment on Site: _____ (Extinguishing type)

Container to be burned in: _____ (Size and type)

Container to remove burned debris from site type: _____

APPLICANT INFORMATION:

Vendor Company: _____ Vendor Phone Number: _____

PCB Business License Number: _____

Name of Applicant: _____

Contact Phone Number: _____ Email: _____

Signatures below and included in property permission, show that the applicant and owner take full responsibility for the event and the rules to be followed herein.

I HAVE READ, UNDERSTAND, AND WILL COMPLY WITH THE CITY OF PANAMA CITY BEACH ORDINANCE NO. 1529 AND THIS APPLICATION PROCESS AS OUTLINED:

Applicant Signature: _____ Date: _____

FOR OFFICE USE ONLY:	
Fire Inspector Approval:	_____ (Fire Inspector Signature) _____ Date
Code Enforcement Approval:	_____ (Code Enforcement Signature) _____ Date

PROPERTY OWNERSHIP INFORMATION AND PROPERTY USE AUTHORIZATION

Property Address: _____
Property Name / Description: _____
Property Owner Name: _____ Property Owner Phone Number: _____
Property Owner Address: _____ State: _____ Zip Code: _____

Inclusive Date(s) for property permission: from: _____ to: _____ *
*Within one Calendar year start date end date

If an agent will be acting on behalf of the property owner with regard to the application and any associated procedures, the property owner's authorization and notarized signature is required here:

_____ is a representative of _____
(Acting Agent - acting for owner) (Property Owner - printed name)

and is authorized to act as my agent with regard to this application and associated procedures.

(Property Owner's Signature)

STATE OF FLORIDA, COUNTY OF _____ Notary Name _____

Seal

Sworn to (or affirmed) and subscribed before me
this _____ day of _____ 20 _____, Personally known or I.D. _____

For all permits, the vendor / applicant shall provide written notarized permission from the property owner and/or acting agent to conduct vendor business on the beachside property as well as permission for all customers and employees of the vendor to use the restrooms of the property. This is required in addition to submittal of the application and a complete site plan.

_____ has permission of _____
(Vendor / Applicant's Name) (Property Owner or Acting Agent authorized above)

to set up and conduct business on this property. Additionally, patrons will be allowed access and use of existing business restrooms.

(Property Owner's / Agent's Signature)

STATE OF FLORIDA, COUNTY OF _____ Notary Name _____

Seal

Sworn to (or affirmed) and subscribed before me
this _____ day of _____ 20 _____, Personally known or I.D. _____

If property ownership changes, this permission becomes void will not be used for permit requests.