APPLICATION FOR BARBECUE PERMIT

**Application for Permit must be submitted at least 10 business days prior to Event.**

DATE SUBMITTED: ______________________

ORGANIZATION/DEPARTMENT: _________________________________________________________

CONTACT PERSON: ________________________ FACULTY – STAFF – STUDENT (Please circle one)

TELEPHONE: ________________________________

CELL PHONE: ______________________________ EMAIL: ____________________________

DATE OF BBQ: ______________________________

START TIME: ______________________________ END TIME: ___________________________

LOCATION OF EVENT: _________________________________________________________________

NUMBER OF PEOPLE ANTICIPATED: ________________ FIRE EXTINGUISHER NEEDED? YES / NO

PHYSICAL PLANT NOTIFIED? YES / NO PHYSICAL PLANT NEEDS TO BE NOTIFIED 10 DAYS PRIOR TO FOR SET UP

NATURE OF EVENT (Please describe event)

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COOKING EQUIPMENT: CHARCOAL GRILL ________________ GAS GRILL ______________________

CONDITIONS & REQUIREMENTS:
1. Cooking equipment **shall not be placed within 25 feet** of any Regis College building, house, automobile or any other structure.
2. A Fire Extinguisher must be present at the location of the event and within 10 feet of the Barbecue being used.
3. When finished with a GAS Grill – please ensure the gas is turned off and disconnected from the grill itself.
4. When finished with a CHARCOAL grill – please ensure they coals are completely out at the end of the event. Please do not discard coals while they are still hot.
5. Barbecues must be attended at all times.
6. 1 person is responsible for the use of the Barbecue.
7. Ensure that children are not near or come into contact with the Barbecue

RESPONSIBLE PERSON PRESENT AT EVENT: ___________________________________________

FIRE SAFETY AUTHORIZATION – FILLED OUT BY FIRE SAFETY OFFICER ONLY

FIRE EXTINGUISHER #:______ EXTINGUISHER TYPE: ______________ INSPECTED BY: _______

DATE OF EXTINGUISHER INSPECTION: _______

EVENT AUTHORIZED: YES____ NO____ AUTHORIZED BY: ___________________________ DATE:______________