

Fire Marshal/Emergency Management

Mailing: P. O. Box 370 Lillington, NC 27546
Physical: 200 North 13th Street, Suite 19
Erwin, NC 28339



910-893-7580



910-893-5025

APPLICATION FOR PLAN REVIEW

APPLICATION NUMBER: _____ - _____

TODAY'S DATE: _____ RECEIVED BY: _____

SUBMITTED BY: _____

NAME OF PROJECT: _____

PHYSICAL ADDRESS: _____

PHONE NUMBER: _____ EXT.: _____

CONTACT PERSON: _____

MAILING ADDRESS: _____

PHONE NUMBER: _____

CONTRACTOR'S NAME: _____

MAILING ADDRESS: _____

PHONE NUMBER: _____

NOTICE

PLANS THAT ARE SUBMITTED WILL BE REVIEWED AS QUICKLY AS POSSIBLE, WITH AN AVERAGE TIME OF REVIEW BETWEEN 7 – 10 WORKING DAYS.

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TENT APPLICATION

DATE: _____

EVENT: _____

APPLICANT: _____

LOCATION: _____

ADDRESS: _____

EVENT DATE: _____ **PHONE:** _____

CONTACT PERSON FOR EVENT: _____

PHONE: _____

TENT INFORMATION

SQUARE FOOTAGE: _____

COOKING EQUIPMENT: YES _____ NO _____

FLAME RESISTANT: YES _____ NO _____ **NO#:** _____

FIRE EXTINGUISHERS: YES _____ NO _____ **SIZE:** _____

NO SMOKING SIGNS: YES _____ NO _____