

North Lake Tahoe Fire Protection District

866 Oriole Way, Incline Village, NV 89451

Phone: (775) 831-0351



TEMPORARY ACTIVITY APPLICATION

APPLICANT/POINT OF CONTACT:		EMAIL:
EVENT ADDRESS:		PHONE:
CITY:	STATE:	ZIP:
NAME AND DESCRIPTION OF EVENT		
Temporary Activity Fees are based on current NLTFPD fee schedule		

1. General Information Checklist for applicant to submit and include on Site Plan:	Applicable or N/A
Event organizer name, address, email, and phone number on site plan.	
Emergency contact name, address, email, and phone number on site plan.	
Estimated number of attendants on site plan.	
Locations & gross square footage for each separate tent / booth on site plan.	
Depict location of 2A:10-B:C Fire Extinguisher 75' max ft. distance ft. of event area on site plan.	
Depict location of generators on site plan.	
Depict location of heating on site plan.	
Depict location of exit illumination on site plan.	
Depict location of access roadways with driveway/egress location on site plan or vicinity map.	
Depict location of cooking or use of open flames on site plan.	
Show means to keep vehicles at a safe distance from areas where people will congregate.	
Depict location of electrical outlet and extension cord protection.	

Crowd Managers			
Note: Per International Fire Code, events that involve a gathering of > 500 people, shall have Crowd Managers present.			
Crowd Manager(s) Name	Cell Phone Number	Driver License #	Attach Proof of Training

Crowd Managers 403.12.3.3 Duties. The duties of Crowd Managers shall include, but not be limited to:

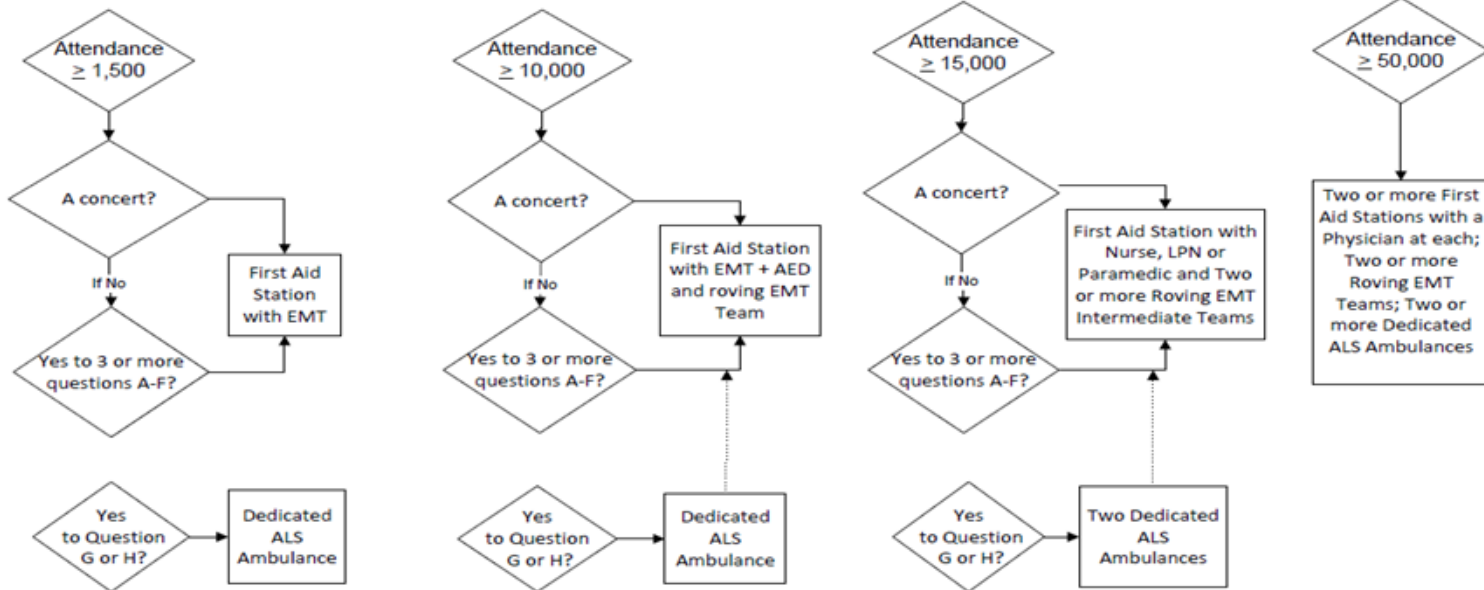
- ✓ Conduct an inspection of the area of responsibility and identify and address any egress barriers.
- ✓ Conduct an inspection of the area of responsibility to identify and mitigate any fire hazards.
- ✓ Verify compliance with all permit conditions, including those governing pyrotechnics and other special effects.
- ✓ Direct and assist the event attendees in evacuation during an emergency and assist response personnel when requested.
- ✓ Other duties required by the fire code official and as specified in the fire safety plan.

By physically signing or electronically signing and submitting this application I acknowledge that all work will be performed in compliance with the codes and standards adopted by North Lake Tahoe Fire Protection District, Per Resolution 18-1,18-2 and 22-01. Furthermore, all work will be completed by contractors and/or employees licensed through either the Nevada State Fire Marshal Division and/or the Nevada State Contractors Board, as applicable by NAC 477.300 and NRS 624.020.

I also recognize tents, membrane structures, stages and other items erected at the event may require separate permits from NLTFPD and other outside agencies including but not limited to [Washoe County](#), [Environmental Health](#), etc.

SIGNATURE: _____ **DATE:** _____

* The Point of Contact (POC) is the sole individual tasked with corresponding or communicating with the NLTFPD. All communications from this office will be addressed to the POC.



QUESTIONS

- High-risk activities such as sports, racing, etc.?
- Environmental hazards or extremes of heat or cold?
- Average age of crowd less than 25 or greater than 50?
- Crowd includes large numbers of persons with acute or chronic illnesses?
- Crowd density presents challenges for patient access or transfer to ambulance?
- Alcohol to be sold at the event, or a history of alcohol or drug use by the crowd at prior events?
- Past history of significant number of patient contacts at the event or patients transported to area hospitals?*
- Event greater than 5 miles from the closest hospital?

** Significant is defined as (1) the number of patient contacts is $\geq 0.7\%$ of the total number of attendees, or (2) transport rate to hospital by ambulance or private vehicle is $\geq 15\%$ of total patient contacts

DEFINITIONS

First Aid Station: Fixed location on site staffed by at least one Emergency Medical Technician or a person with a higher skill level capable of providing emergency medical care within their proscribed scope of practice.

Roving EMT Team: team of two or more personnel at the basic or EMT Intermediate level with treatment supplies to provide emergency medical care.

Dedicated ALS Ambulance: An Advanced Life Support ambulance staffed by a Paramedic and Intermediate EMT, or personnel with a higher skill level, and capable of providing transport of patients, but which will immediately respond back to the event site.