



ARLINGTON COUNTY FIRE DEPARTMENT

Fire Prevention Office
2100 Clarendon Boulevard, Suite 400
Arlington, VA 22201

TEL 703.228.4644

www.arlingtonva.us

FAX 703.228.7097



Special Event Application

Fees shall be levied in accordance with the Arlington County Fire Prevention Code for operational permits and related inspections.

Date of Event: _____ Event Type: _____

Name of Event Organization: _____

Address: _____

City: _____ State: _____ Zip code: _____

Event Coordinator/ Sponsor: _____ Phone #: _____

Event Site Owner/ Representative/ Contact Name: _____

Site Phone #: _____ Alternate Phone #: _____

Event Name: _____

Event Address: _____

Start Time of Event: _____ Finish Time of Event: _____

Upon completion of permit inspections you will receive an Invoice. Payment of the Invoice is due 15 days after posted date.

Signature of Applicant: _____ **Date:** _____

The applicant agrees to comply with all rules and regulations as set forth in the Fire Prevention Code and will be held legally responsible for any violations of the Fire Prevention Code.

Mail the application and payment to the following address:

**Arlington County Fire Department
Fire Prevention Office
2100 Clarendon Boulevard, Suite 400
Arlington, VA 22201**

MISSION

We serve the community with compassion, integrity and commitment through prevention, education and a professional response to all hazards.