



**WINDSOR
HEIGHTS**
the heart of it all

City of Windsor Heights

www.windsorheights.org

1145 66th Street, Suite 1 • Windsor Heights, Iowa 50324

Phone 515-279-3662 • Fax 515-279-3664

TEMPORARY STRUCTURE APPLICATION Commercial

Permit Fee: \$50/month per structure

Date of Application: _____

Company Name/Applicant: _____

Address: _____

Phone: _____

Email: _____

Contact: _____

Number of units to be erected: **TENTS** _____ **CANOPIES** _____ **CONNEX** _____

Date(s) and Time(s) of use: _____

Name or owner of tents/canopies: _____

Description of proposed site of structure: _____

The need for such structure: _____

List size of each unit: _____

To be erected by: _____

Flame retardant treatment used: _____

For Fire Department Inspection-

Electrical service to be used?	_____ Yes	_____ No
Cooking facilities to be used?	_____ Yes	_____ No
"No Smoking" signs posted?	_____ Yes	_____ No
Fire extinguishers: Number of	_____ 2A	_____ 2A/10BC
NFPA 1124 requirements met?	_____ Yes	_____ No

_____ 10BC

Payment:

- ☐ Cash
- ☐ Credit Card
- ☐ Check No. _____

SIGNATURE OF MANAGER OR OWNER (APPLICANT)

X _____

DATE: _____

_____ Approved _____ Denied Date: _____

Zoning Administrator

Fire Inspector