



**SANTA BARBARA COUNTY FIRE DEPARTMENT**  
**FIRE PREVENTION DIVISION**  
**INSPECTION SERVICES**  
**TELEPHONE: (805) 686-5077 | EMAIL: [INSPECTION.SERVICES@SBCFIRE.COM](mailto:INSPECTION.SERVICES@SBCFIRE.COM)**



## **Summary of Procedure**

1. Submit application, site plan, copies of Certificates of Flame Resistance or name of tent company to be used, and a list of contact information for food trucks/food vendors (as needed) to [Inspection.Services@sbcfire.com](mailto:Inspection.Services@sbcfire.com). If you do not have access to email, please mail to  
Santa Barbara County Fire Department  
Attn: Inspection Services  
4410 Cathedral Oaks Rd  
Santa Barbara, CA 93110
2. Your application will be reviewed for completeness. Record a site inspection request date and time on your application in the space provided. An inspector will be in contact to verify inspection time and/or clarify details.
3. After a successful inspection is conducted, temporary approval will be granted.
  - If a written and signed letter is needed prior to the event from the Santa Barbara County Fire Department, said letter can be obtained from the Fire Prevention Division after successfully passing the inspection. Please notify inspector when contacted or notify inspection services through phone or email.
4. The cost of the Carnival/Fair permit varies from \$99.00 to \$297.00 depending on the number of attendees. Extra fees may be applicable depending on scope and time of inspection.
  - An invoice for the permit fee will be mailed to the billing address on the application after the site inspection insures compliance to California Fire Code requirements.
  - Payments in the form of a check may also be paper-mailed ahead of time/with the application.

*NOTE: Failure to make timely payment for a permit may result in your company not being able to obtain future permits.*

**Please submit applications at least two (2) weeks prior to event.**



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## Application for Special Events (Carnivals, Fairs, and/or Festivals)

### Event Details

Name of Event		
Date(s) of Event		
Address/Exact Location of Event		
Estimated Number of Attendees	Estimated Number of Staff	
Primary Contact Name		Primary Contact Phone Number
Installation/Removal Date(s)	Set Up	Take Down
Requested Site Inspection	Date	Approximate Time

### Applicant/Billing Information

Applicant Name			
Email Address			
Billing Address			
Business Phone Number	Cell Phone Number		

### Stages

Any Stages to be Erected?	<input type="checkbox"/> Yes		<input type="checkbox"/> No	
Number of Stages	Size (ft. x ft.)	Size (ft. x ft.)	Size (ft. x ft.)	
Any Canopies over Stage?	<input type="checkbox"/> Yes		<input type="checkbox"/> No	
Number of Canopies	Size (ft. x ft.)	Size (ft. x ft.)	Size (ft. x ft.)	

### Tents/Canopies

Tent Company Name/Contact Name (if utilized)		Tent Company Contact Phone Number	
<b>Please attach copies of Certificate(s) of Flame Resistance. (unless provided by Tent Company)</b>			
Number of Tents	Size (ft. x ft.)	Size (ft. x ft.)	Size (ft. x ft.)



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Number of Canopies	Size (ft. x ft.)	Size (ft. x ft.)	Size (ft. x ft.)
Lighting Installed Inside Tent?		<input type="checkbox"/> Yes	<input type="checkbox"/> No
Heating Installed Inside Tent?		<input type="checkbox"/> Yes	<input type="checkbox"/> No
Cooking Appliances to be Used in Tent?		<input type="checkbox"/> Yes	<input type="checkbox"/> No
Explain Equipment to be Used for Heating/Cooking Appliances			
Explain Types and Quantities of Fuel			

**Safety**

Any Blocked Public Streets or Alleyways?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
<b>Indicate street names with roadblock locations on site map to be attached.</b>		
Any Blocked Private Driveways or Entries?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
<b>Indicate driveway address(es) and blockage locations on site map to be attached.</b>		

**Required Attachments**

- ☐ **Site Map:** Detail event layout, blocked streets/driveways, where fire safety items will be placed.
- ☐ **List of Food Trucks/Food Vendors:** Include Vendor/Truck Name(s), Contact Name(s), and Contact Phone Number(s).
- ☐ **Fire Suppression and Notification Plan**
- ☐ **Evacuation Plan**
- ☐ **Medical Plan**
- ☐ **Communications Plan**

**Email Completed Application to:**

[INSPECTION.SERVICES@SBCFIRE.COM](mailto:INSPECTION.SERVICES@SBCFIRE.COM)

**or Mail Completed Application to:**

SANTA BARBARA COUNTY FIRE ATTN: INSPECTION SERVICES  
4410 CATHEDRAL OAKS RD, SANTA BARBARA, CA 93110

**Telephone: (805) 686-5077 ; Fax: (805) 686-5071**