MIAMI BEACH FIRE DEPARTMENT

Fire Prevention Division

HAZE PERMIT APPLICATION



vent:			V
Rehearsal Date:	Haze Start Time:	Haze End Time:	
Event Date:	Haze Start Time:	Haze End Time:	
Location:			
Company/Coordinate	or:		
Business Address:			
Onsite Contact Perso	າ:	Mobile:	
E-Mail:			
Fire Alarm Technician	:	Mobile:	
Signature of Applicar	t:		
		is request for approval by the fire departragent for use in assembly occupancies.	ment.
	Permit must be on site during o	III phases of operation	
Below to be co	mpleted by the Miami Beach Fil	re Department will serve as the p	ermit:
Comments:			

Approved by:

Date: _____