

## Calvin College Use of Open Flame Request Form

Person, Group or Organization making request \_\_\_\_\_

Date of Event \_\_\_\_\_

Name of Event \_\_\_\_\_

Inside a building or  Outside

**If INSIDE:**

Location (building & room #) of Event \_\_\_\_\_

Is the building equipped with a fire alarm system? \_\_\_\_\_

Is the building equipped with a fire sprinkler system? \_\_\_\_\_

**If OUTSIDE:**

Location of Event (approx. distance from nearest building, specific location of fire pit, etc)  
\_\_\_\_\_

What is the reason you wish to use flames outside (bbq, syrup making, etc)  
\_\_\_\_\_

**COMPLETE SECTION BELOW FOR INSIDE AND OUTSIDE EVENTS**

Number of people expected to attend this Event \_\_\_\_\_

Describe the open flame devices you wish to use and how they will be used \_\_\_\_\_  
\_\_\_\_\_

Who will provide fire watch (has hands-on fire extinguisher training and has an ABC fire extinguisher readily available) \_\_\_\_\_

Provide a layout of the venue that includes the location of the devices, location of the audience, and the location and number of fire extinguishers.

If your request is approved, you must have a fire extinguisher near the event (easily/readily accessible), a person trained in the use of a fire extinguisher, and someone to make sure the flames are fully extinguished after the event and that there isn't evidence of anything smoldering.

Please keep in mind that some requests will require approval from the City of Grand Rapids. This could take up to 2 weeks.

Approved \_\_\_\_\_ Denied \_\_\_\_\_ By \_\_\_\_\_ Date \_\_\_\_\_

Comments \_\_\_\_\_

**Send completed form to Jennifer Ambrose ([jambrose@calvin.edu](mailto:jambrose@calvin.edu)) EHS Officer or Bill Corner ([wtc2@calvin.edu](mailto:wtc2@calvin.edu)) Campus Safety Director at least 7 days prior to the event.**