

County of Hawaii, International Building Code 2006
Temporary Structures Code Regulations

SECTION 107 TEMPORARY STRUCTURES AND USES**107.1 General.**

The building official is authorized to issue a permit for temporary structures and temporary uses. Such permits shall be limited as to time of service, but shall not be permitted for more than 180 days. The building official is authorized to grant extensions for demonstrated cause.

107.2 Conformance.

Temporary structures and uses shall conform to the structural strength, fire safety, means of egress, accessibility, light, ventilation and sanitary requirements of this code as necessary to ensure public health, safety and general welfare.

107.3 Temporary power.

The building official is authorized to give permission to temporarily supply and use power in part of an electric installation before such installation has been fully completed and the final certificate of completion has been issued. The part covered by the temporary certificate shall comply with the requirements specified for temporary lighting, heat or power in the ICC *Electrical Code*.

107.4 Termination of approval.

The building official is authorized to terminate such permit for a temporary structure or use and to order the temporary structure or use to be discontinued.

SECTION 3103 TEMPORARY STRUCTURES**3103.1 General.**

The provisions of this section shall apply to structures erected for a period of less than 180 days. Tents and other membrane structures erected for a period of less than 180 days shall comply with the *International Fire Code*. Those erected for a longer period of time shall comply with applicable sections of this code.

3103.1.1 Permit required.

Temporary structures that cover an area in excess of 120 square feet (11.16 m²), including connecting areas or spaces with a common means of egress or entrance which are used or intended to be used for the gathering together of 10 or more persons, shall not be erected, operated or maintained for any purpose without obtaining a permit from the building official.

3103.2 Construction documents.

A *permit* application and *construction documents* shall be submitted for each installation of a temporary structure. The *construction documents* shall include a site plan indicating the location of the temporary structure and information delineating the *means of egress* and the *occupant load*.

3103.3 Location.

Temporary structures shall be located in accordance with the requirements of Table 602 based on the *fire-resistance rating* of the *exterior walls* for the proposed type of construction.

3103.4 Means of egress.

Temporary structures shall conform to the *means of egress* requirements of [Chapter 10](#) and shall have a maximum *exit access* travel distance of 100 feet (30 480 mm).



HAWAII FIRE DEPARTMENT

FIRE PREVENTION BUREAU

HILO: 25 Aupuni St. Suite 2501, Hilo, HI 96720 (808) 932-2913 or (808) 932-2914
 KONA: 74-5044 Ane Keohokalole Hwy, Bldg E, Kailua-Kona, HI 96740 (808) 323-4760

Date: _____
 Payment Amount: _____
 Received By: _____
 Permit Number: _____
For Fire Department Use Only

TENT / FAIR / MARKET PERMIT APPLICATION

Completed application shall be submitted with payment to the Hilo or Kona fire prevention office. Payment may be cash or check. Checks shall be made out to 'County Director of Finance'.

(To be completed by applicant)

Permit Type: Carnival or Fair Farmer's Market, Open Market, or Flea Market Tent/Temporary Structure

Carnival or Fair Permit \$100.00 from _____ to _____ (Dates)	Farmer's Market, Open Market, or Flea Market \$25.00 <input type="checkbox"/> April 1 to September 30 <input type="checkbox"/> October 1 to March 31 Year _____	Tent/Temporary Structure Permit \$25.00 per tent >700sqft, tents <10' apart shall be counted as one tent. from _____ to _____ (Dates)
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Business/Event Name: _____

TMK: _____

Address/Location: _____

City/State: _____ Zip Code: _____

Applicant: _____ Phone: _____

Fax: _____ E-Mail Address: _____

Mailing Address for Permit: _____

***A Site Map shall be attached.** Site map shall depict all structures, temporary or permanent, with dimensions. Distances to fire department water supplies, emergency access routes, and location of fire extinguishers shall also be depicted. Nearest street or public way shall be included and labeled as a frame of reference. A ⊗ symbol shall be used to depict fire extinguishers, and a label shall be included with its size and classification.

(To be completed by HFD)

INSPECTION

- Detailed Site Map Submitted Yes No LPG > 10' from general public Yes No N/A
- Fire Protection Equipment Satisfactory Yes No LPG Tanks Secured Yes No N/A
- Emergency Lighting Satisfactory Yes No N/A Tents Secured Yes No N/A
- Staff Proficient in Evacuation Training Yes No Tents >25' from Vehicles Yes No N/A
- Open flame cooking producing grease laden vapors under noncombustible roof Yes No N/A
- K Extinguisher for Deep Fat Frying <30' Yes No N/A
- Emergency Exits, Egress & Access Satisfactory Yes No

Date Extinguishers Inspected: _____ Inspected by: _____

Comments: _____

APPLICANT SIGNATURE: _____ DATE: _____

INSPECTOR SIGNATURE: _____ DATE: _____

APPLICATION FOR TEMPORARY FOOD ESTABLISHMENT PERMIT

(Please type or print in black or blue ink)

(A) NAME OF ORGANIZATION OR ESTABLISHMENT			(B) LOCATION OR ADDRESS OF EVENT (ONLY ONE)		
(C) CONTACT PERSON			(D) CONTACT PERSON PHONE #	FAX PHONE #	
DAY	(E) DATE OF EVENT	(F) TIME OF EVENT	DAY	(E) DATE OF EVENT	(F) TIME OF EVENT
1.			11.		
2.			12.		
3.			13.		
4.			14.		
5.			15.		
6.			16.		
7.			17.		
8.			18.		
9.			19.		
10.			20.		
(G) NAME OF APPROVED KITCHEN (COMMISSARY)			(H) STREET ADDRESS OF KITCHEN		(I) PERMIT NO.
KITCHEN USE AUTHORIZED BY: (J) (OR ATTACH LETTER OF AUTHORIZATION)					
_____ (K) SIGNATURE OF AUTHORIZED PERSON			_____ (L) KITCHEN PHONE NUMBER		
_____ (M) PRINT NAME OF AUTHORIZED PERSON			_____ (N) TITLE		

(O) LIST FOOD ITEMS. NO HOME PREPARED FOOD. REMINDER: KEEP HOT FOOD ABOVE 140°F. KEEP COLD FOOD BELOW 45 °F.		

(CONTINUE FOOD ITEMS ON A SEPARATE PAPER IF NEEDED)

(P) ATTACH: SITE PLAN – INCLUDE HAND WASHING FACILITIES, BOOTH LAYOUT

The Sanitation Branch, Department of Health reserves the right to deny your Temporary Food Establishment Permit or revoke the permit for failure to comply with the sanitary requirements of Hawaii Administrative Rules, Title 11, Department of Health, Chapter 12, Food Establishment Sanitation. The permit applicant may be required to submit a complete menu and schematic plan of the proposed operation.

THIS PERMIT IS ONLY VALID FOR TWENTY (20) DATES IN ANY 120 DAY PERIOD

_____ (Q) DATE	_____ (R) SIGNATURE OF APPLICANT
_____ (S) TITLE	_____ (T) PRINT NAME OF APPLICANT

FEE \$25.00 NON REFUNDABLE SUBMIT APPLICATION AND FEE AT LEAST TEN WORKING DAYS PRIOR TO EVENT

MAKE CHECKS PAYABLE TO: **STATE OF HAWAII (BANK ACCOUNT NAME AND ADDRESS MUST BE ON THE CHECK)**

SUBMIT COMPLETED APPLICATION AND FEE TO: **ENVIRONMENTAL HEALTH FACILITY
 1582 KAMEHAMEHA AVENUE
 HILO, HI 96720**

THERE WILL BE A SERVICE FEE OF \$25.00 FOR ANY CHECK DISHONORED BY THE BANK.

APPROVED:

_____ DATE	_____ SIGNATURE OF AGENT/DEPARTMENT OF HEALTH	_____ R.S. LIC. NO.	Department of Health Seal
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SECTION BELOW FOR OFFICIAL HEALTH DEPARTMENT USE ONLY

FEE \$25.00	DATE PAID	METHOD OF PAYMENT	RECEIPT NO.	RECEIVED BY
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ATTACHMENT D - PERMIT AND APPROVAL FORMS
**INSTRUCTIONS FOR
TEMPORARY FOOD PERMIT APPLICATIONS**

- *All establishments, organizations, or individuals distributing or selling food to the public for a limited period of time (not exceeding 20 dates within a 120 day period) are required to submit a Temporary Food Establishment Permit Application to the Department of Health, Sanitation Branch. **Applications will not be processed if the form is incomplete.***
 - *Applications and \$25.00 fee should be submitted at least ten (10) working days prior to event.*
 - *All exemptions will be decided by the Department of Health Sanitation Branch.*
 - *Approved permit may be picked-up OR faxed OR mailed to you (include a self-addressed, stamped envelope with the application).*
- A. NAME OF ORGANIZATION OR ESTABLISHMENT: Name of organization or establishment administering the food operation. Each permit applies to **one (1) organization or establishment only.**
- B. LOCATION OR ADDRESS OF EVENT: Site of food distribution. Each permit applies to **one (1) location.**
- C. CONTACT PERSON: Name of person(s) representing the organization or establishment.
- D. CONTACT PHONE OR FAX NUMBER: Phone and/or FAX number of person(s) representing the organization or establishment.
- E. DATE OF EVENT: One date per line (Maximum of 20 dates within a 120 day period, starting from the date of the first event).
- F. TIME OF EVENT: Start to end time of event.
- G. NAME OF APPROVED KITCHEN (COMMISSARY): Name of approved commercial kitchen (commissary) where food preparation, food storage, utensil washing, etc. will be done.
The proposed approved kitchen (commissary) must be approved by the Department of Health for the temporary food event. Home kitchens are not acceptable for use.
- H. STREET ADDRESS OF KITCHEN: Street address of approved commercial kitchen (commissary) where food preparation, food storage, utensil washing, etc. will be done.
- I. PERMIT NO.*: Permit number of the approved commercial kitchen (commissary) where food preparation, food storage, utensil washing, etc. will be done.
*Permit number issued by the State Department of Health
- J. (OR ATTACH LETTER OF AUTHORIZATION): Instead of having the Authorized Person sign the application, a letter of authorization from the person in charge of the kitchen may be submitted which must include information G, H, I, K, L, M, and N.
- K. SIGNATURE OF AUTHORIZED PERSON: Signature of person giving permission to use the approved commercial kitchen (commissary).
- L. KITCHEN PHONE NUMBER: Phone number of approved commercial kitchen (commissary).
- M. PRINT NAME OF AUTHORIZED PERSON: Print name of “(K) Signature of Authorized Person.”
- N. TITLE: Title of “(K) Signature of Authorized Person.”
- O. LIST OF FOOD ITEMS: All food and drink items being sold or distributed at the event (in the case of “BBQ” chicken sales, include the number of pieces of half or whole chickens to be sold).
- P. SITE PLAN, BOOTH LAYOUT: On a separate paper draw a site plan showing the booth where food will be distributed including handwashing facilities, warmers, burners, cookers, etc.
- Q. DATE: Date submitting application.
- R. SIGNATURE OF APPLICANT: (Applicant and contact person need not be the same person).
- S. TITLE: Title of “(R) Signature of Applicant.”
- T. PRINT NAME OF APPLICANT: Print name of “(R) Signature of Applicant.”