

Fire regulations exemption

Request form

Event		
Event name		
Event date		
Company name		
Personal information		
Name of applicant		
Postal address		
Postcode/city		
Phone number		
Email		
Contact on site		
Phone number on site		
Exemption		
Tick your reason for the request:		
Using a fire place or fire		
Use of compressed gases – indicate number/	volume	
Release of engine combustion gases		
Use of cookers/heaters for frying/cooking		
Demonstrations (grilling, frying or cooking)		
Demonstrations (grilling, rrying or cooking)		
Describe the activity		
Indicate which inflammable substances will be use	ed	
Other comments		
Name	City	Date
Name	Oity	Date
Signature		

The person signing this form is authorised to sign on behalf of the named company. The signature confirms he/she agrees to the conditions (as describes in the enclosed fire regulations) related to the request. Compliance with the aforementioned conditions is compulsory.

Please sign the form and send to safety@rai.nl