



Fire Marshal Division
P.O. Box 370
Lillington, NC 27546
910-893-7580



Application for Plan Review

Permit Type: _____

Date Received: _____ Received By: _____

Name of Project: _____

Physical Address of Project: _____

Plans Submitted By: _____

Project Phone: (_____) - ____ - ____

Contact Person/Address: _____

Contact Phone: (_____) - ____ - ____ (_____) - ____ - ____

Contractor's Name/Info: _____

Contractor's Phone: (_____) - ____ - ____

Contact Email: _____

- **Plans that are submitted will be reviewed as quickly as possible with an average time of review between 7-10 working days.**
- **Status checks may be conducted on plan reviews by visiting the website <http://hteweb.harnett.org/Click2GovBP/Index.jsp> or by calling the Harnett County Central Permitting Office (910-893-7525 : Opt. 2), or the Harnett County Fire Marshal's Office (910-893-7580).**
- **Approved plans must be picked up from the Central Permitting Office and all fees paid before any required inspections can be conducted.**

Winter Holiday Market & Food Truck Rodeo

Saturday, November 22, 2025



Event Date: November 22, 2025

Event Time: 11:00am-3:00pm

Event Location: 249 East Williams St. Angier, NC 27501

**Contact: Kayla Byington,
(919)793-4127**

We will have 15 food trucks in the parking lot along with 100 local artisan vendors selling products on the baseball field.

There will be inflatables in the lawn and a DJ stationed outside the field.



Harnett County

Emergency Services

Mass Gathering / Special Event Application

1.	Name of Event:			
2.	Name of Organization:			
3.	Date(s):			
4.	Time(s):	Start:	End:	
5.	Location/Address:			
6.	Type of Event: <small>Check All Applicable</small>	<input type="checkbox"/> Public Gathering	<input type="checkbox"/> Religious	<input type="checkbox"/> Parade
		<input type="checkbox"/> Walk or Run	<input type="checkbox"/> Private Gathering	<input type="checkbox"/> Other (explain in # 8)
7.	Estimated Attendance:	Participants: Spectators:	Children: Staff Workers:	Total #:
8.	Brief description of the event:			
9.	Special Request: <small>(ex. Training Equipment, CPR Demonstration, Ambulance Demo, First Aid Station, Tent, Chair(s), & Table(s) for EMS)</small> <small>**Note the special request section is items that will be needed or requested for the stand-by / public education crew.**</small>			
10.	<input type="checkbox"/> Check box for attached site map including the staging, assembly areas, streets traveled (exact route), beginning & ending points, and labeled key points.			
11.	Primary Contact Person Name:			
	Daytime Phone:		Mobile Phone:	
	Evening Phone:		Fax:	
	Mailing Address:			
	Email:			
12.	By signing my name below, I certify that I have read the Harnett County EMS System Mass Gathering Policy. Any questions concerning these policies have been discussed. My signature also certifies my understanding of and agreement with the Mass Gathering Policy. A photocopy of this document is as valid as the original. You may receive a copy of this document upon request.			
	Signature: Karla Byington			