

Philadelphia Fire Department
Emergency Medical Services (EMS)
Special Event Application

This form can be filled out on a computer, saved locally and emailed

Name of Event: _____

Type of Event: _____

Location: _____

Date(s) of event: _____

Hours of event: _____

Estimated attendance (including participants and spectators): _____

Event Coordinator: _____

Street address: _____

City, State, Zip: _____

Contact phone number: _____

Contact cell number: _____

E-mail: _____

The Philadelphia Fire Department assesses all EMS needs within the City for Special Events. The Fire Department will contact you to meet to discuss the proper EMS coverage (if applicable) for this Special Event. Fire Department services are fee based.

Return Application to: Philadelphia Fire Department
Special Event Planning
240 Spring Garden Street
Philadelphia, PA 19123

Email: PFDPlanning@phila.gov

Fax: 215.685.4207