

City of Philadelphia

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

Name of the event: _____

Type of event: _____

Location: _____

Date(s) of event: _____

Hours of event: _____

Estimated attendance (include participants and spectators): _____

Special Needs: _____

Name of sponsoring organization: _____

Event Coordinator: _____

Street address: _____

City State Zip Code: _____

Contact phone number: _____ Cell number: _____

E-mail address: _____

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 particular Special Event. Fire Department services are fee based.

Return Application to: Philadelphia Fire Department
EMS Special Events
115 W. Luzerne St.
Phila., PA 19140
215.685.9167

Or fax to:

Any questions call: 215.685.9170

** Application must be completed at least 60 days before the event date **