



APPLICATION FOR A SPECIAL EVENT PERMIT

TODAYS DATE _____

NAME/ORGANIZATION/BUSINESS _____

DATE(S) OF EVENT _____ HOUR OF OPERATION _____

ADDRESS OF EVENT _____

ANTICIPATED ATTENDENCE/EMAIL _____

CONTACT PERSON: NAME/PHONE # _____

TYPE OF EVENT (BRIEF DISCRIPTION) _____

Parking arrangement (must include written approval if using another person parking): _____

SECURITY MEASURES

Security Contact Person _____ Phone # _____

Emergency Vehicle Access Location _____

Emergency Contacts: NAME/ADDRESS/PHONE NUMBER

1. _____

2. _____

Type/Size of Temporary Structure _____

Type of Cooking Structure (include size & number) _____

Location of Cooking Facility _____

Neighbor signatures required. Please ATTACH A SITE PLAN TO THE APPLICATION SHOWING REQUESTED INFORMATION. It does not have to be to scale but must show all dimensions. Block parties show street access points.

Approval Signatures required.

FIRE MARSHALL _____ FIRE CHIEF _____

RECREATION _____ TWP CLERK _____

CONSTRUCTION OFFICIAL _____ PUBLIC WORKS _____

ZONING _____ POLICE CHIEF _____

