

PRELIMINARY APPLICATION FOR A SPECIAL EVENT PERMIT

So that we may assist you in the planning process for a Special Event which is more than one (1) month away, please provide the following information. Additional information and a final application will be needed as the event date approaches.

Name and Description of Event: _____

Applicant Information

Name: _____

Address: _____

City, State, Zip: _____ Phone: _____

If the event is to be held by or for any person other than the applicant, the applicant shall attach a written statement from that other person showing authority to make this application.

Organization Information

Organization Name: _____

Authorizing Person: _____

Phone: _____

Event Chairperson

Name: _____

Address: _____

Phone: _____ Email: _____

Event Information

Event Location/Address _____

Purpose: _____

Date/s of Event: _____

Hours of Operation: _____

Date On-Site Preparation Will Begin: _____

Approximate Number of Persons Attending Event per Day and for Duration of Event: _____

