

CITY OF BURLINGTON

SPECIAL EVENT PERMIT APPLICATION

For Office Use Only

Date of Application: _____

Permit Number: _____

Sent for Staff Review: _____

Council Meeting: _____

SUMMARY OF EVENT

Event Title: _____ Date of Event: _____

Event Location: _____

Nature of Event: Festival Parade Bike Race/Ride Foot Race/Run March/Processional
 Rally Circus Demonstration Other: _____

Site Plan Requirement: All applicants are required to submit a detailed Site Plan/Map. Site plans/maps must include location, any street closures, barricades, race/parade routes, stages, alcohol sale location, tents, etc.

Certificate of Insurance: The City of Burlington must be listed as the Certificate Holder and as additionally insured. If alcohol is being served, Liquor Liability coverage must also be included.

(Minimum Liability Limits, unless otherwise specified: General Liability: \$1,000,000 per Occurrence, \$2,000,000 Aggregate; Automobile: \$1,000,000 Combined Single limits; Umbrella Liability: \$1,000,000; Workers Compensation: State Minimum)

Description of Event: Describe what you are planning so that reviewing officials can determine whether city services will be needed.

Anticipated Attendance (participants, staff, vendors, crowd, etc.): _____

Is this a multi-day event? Yes No

If so, how many days? _____

Start Date: _____ End Date: _____

EVENT ORGANIZER INFORMATION

Applicant Name: _____

Group Represented: _____

Address: _____

Phone: _____ Email: _____

Person In Charge of Event: _____

On-Site Contact: _____ On-Site Phone: _____

Billing Address: _____

DETAILED EVENT INFORMATION

Event Set Up Date: _____ Time: _____

Start Time For Event: _____ a.m./p.m. End Time For Event: _____ a.m./p.m.

Alcohol Being Served*? Yes No Licensed Agent: _____

*An application for a Temporary Class "B"/"Class B" Retailer's License must be submitted and approved to serve alcohol.

Are Park Reservations Necessary? Yes No

*Park reservations must be made via the Department of Public Works. Please call 262-342-1181 for more information.

Barricades Needed*? Yes No Amount Needed & Locations: _____

*This may result in a fee

Will A Temporary Structure or Tent Be On-Site? Yes No Does the Tent have Sidewalls? Yes No

Police Services Requested*? Yes No

Hours & Dates Police Services Needed: _____

*This may result in a fee

Trash Receptacles Needed*? Yes No Amount Needed & Locations _____

*This may result in a fee

Person(s) Responsible for Clean Up After the Event: _____

Picnic Tables Needed*? Yes No Amount Needed & Locations _____

*This may result in a fee

Will Your Event Involve Live Performances, Loud Speakers or a DJ*? Yes No

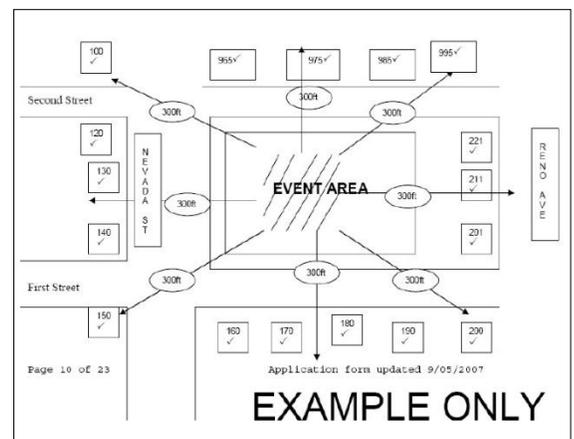
*Per Section 219-2A(7) of the Municipal Code, loudspeaker or sound-amplifying devices shall not be used between the hours of 10 PM to 8 AM and privileges may be revoked if the volume becomes a nuisance.

IMPACTED NEIGHBOR NOTIFICATION

The Event Organizer shall notify all residences and businesses within any street closure or lane restriction area of the upcoming event.

Notification shall include the following information:

- Event name
- Dates and times of event
- A brief description of the event
- Any closure areas
- Where attendees will be parking



AFFIDAVIT OF APPLICANT

I, the undersigned applicant, or authorized agent thereof, swear or affirm that the matters stated in the foregoing application are true and correct upon my personal knowledge and information for the purpose of requesting the City of Burlington to approve the Special Event and other permits herein applied for, that I am qualified and eligible to obtain the permit applied for and agree to pay all fees, to meet all requirements and any additional regulations, conditions, or restrictions set forth in the permit and to comply with the laws of the City of Burlington in the conduct of the Special Event described herein.

I/We, the undersigned, agree to abide by all City Ordinances and the rules and regulations which are made part of this permit application and hereby release, discharge, hold harmless and agree to defend the City of Burlington, its officers, agents, and employees from and against any and all loss that may arise out of or result from, in any way, in whole or in part, the scheduled event, the conduct or actions of any individual participating in or attending the scheduled event, the issuance of the Road Closing Permit or the closing of any road (whether or not a Permit has been issued) for the scheduled event.

Signature of Applicant

Date of Signature

CITY OF BURLINGTON STAFF USE ONLY

POLICE DEPARTMENT REVIEW

Approval Recommended: YES NO
Police Hours Required: _____
Estimated Fee for Police Service: _____
Reviewed By: _____
Date: _____

Comments and/or Stipulations for Event:

PUBLIC WORKS DEPARTMENT REVIEW

Approval Recommended: YES NO
Hours Required: _____
Estimated Fee for DPW Service: _____
Reviewed By: _____
Date: _____

Comments and/or Stipulations for Event:

FIRE DEPARTMENT REVIEW

Approval Recommended: YES NO
Hours Required: _____
Estimated Fee for BFD Service: _____
Reviewed By: _____
Date: _____

Comments and/or Stipulations for Event:

BUILDING INSPECTION REVIEW

Approval Recommended: YES NO
Hours Required: _____
Estimated Fee for Bldg. Insp. Service: _____
Reviewed By: _____
Date: _____

Comments and/or Stipulations for Event:

HEALTH OFFICER REVIEW

Approval Recommended: YES NO
Hours Required: _____
Estimated Fee for Health Service: _____
Reviewed By: _____
Date: _____

Comments and/or Stipulations for Event:

City Council Meeting Date: _____

City Council Approval Date: _____

Permit Number: _____

Notes: _____