

TOWN OF PARADISE
SPECIAL EVENT/PARADE/STREET FAIRE APPLICATION
(Street Closure Request)
(Must be submitted for approval
at least 15 days prior to date of event)

Date Submitted: _____ **Date of Event:** _____

Name of Applicant

Applicant's Telephone Numbers (Home, Work, Cell)

Applicant's Email Address(s) _____

Name of Organization _____

Address

Name of Person Coordinating Event

Coordinator Telephone Numbers (Home, Work, Cell)

Coordinator's Email Address(s)

Describe the Name of the Event and the Type of the Event _____

Proposed Location, with Boundaries described _____

Special Event Applications Continued.....

Date(s) of Event _____

Time(s) of Event _____

Estimated Number of Vendors Participating _____

Type of Vendors Participating _____

Description of sound amplification equipment being used or musical performance:

Estimated number of persons attending the event each day: _____

Application fee \$ 101.92 (Street Fairs)

Event Staffing Fee (Police/Fire/Public Works/VIPS **\$ 72 per day** (based on last year's request.

Total Fee \$ _____. Received on _____
Date

Attached is an Indemnification and Release Agreement for your review.

Upon approval of this Special Event Application, the Permit will be issued, Indemnification and Release Agreement will be signed by all parties, required Insurance Certificate will be received by the Town, and Event Staffing Fees collected.

Signature of Applicant

SPECIAL EVENT APPLICATION CHECK LIST

Date Submitted: _____

Name of Event: _____

Date of Event: _____

Administrative Process Fee of \$ _____ collected on _____
Date

Event Staffing Fee of \$ _____ collected on _____
Date

Application Received by _____
Town Manager's Office - Name

Application and Blank Permit submitted to Police Chief with request for Staffing Costs and recommendations

Police Chief _____
Date Routed _____ Dated Returned (within 5 days) _____

Application submitted to Fire Chief with request for Staffing Costs and recommendations.

Fire Chief _____
Date Routed _____ Date Returned (within 5 days) _____

Application submitted to Public Works with request for Staffing Costs and recommendations.

Public Works _____
Date Routed _____ Date Returned (within 5 days) _____

Attach Police, Fire and Public Works Recommendations to Application

Submit Application, Indemnification Agreement, Permit, Estimated Staffing Costs and Recommendations from PD, Fire and PW to Town Manager for signatures.

Date Date Approved/Not Approved

Town Attorney signs Indemnification Agreement _____
Date

Notification to Applicant of Approval/Not Approved

Indemnification and Release Agreement to be signed by Applicant

Insurance Certificate Received by Town _____
Date

Payment Received for Town Staffing cost _____
Date

Written Notice to Property Owners/Residents adjoining the location of Event
(Mail 5 days prior to Event) by Town Manager's Office.

Date Mailed

Attach list of Property Owners/Residents