



Town of Basin Special Events Permit Application

The completed special events application must be submitted to the Town Clerk's Office at least fourteen (14) business days prior to the event.

Applicant Information

Responsible party's name: _____

Organization: _____

Address: _____

Contact Phone: _____ E-mail : _____

Event Information

Name of event: _____

Purpose of event (e.g. fund raiser): _____

Event location: _____

Description of event: _____

Event date(s): _____

Event time(s): Start: _____ End: _____

Set up begins: Date: _____ Time: _____

Estimated number of attendees: _____

Estimated number of vehicles: _____

Estimated number of floats, animals and structures which will be used: _____

Description of any sound equipment to be used: _____

Will vendors be present: () No () Yes

Will the event be supervised: () No () Yes

Will the Police Department need to be present: () No () Yes

Street Closures, Park Closures, Sidewalk Closures or No Parking Signs

Please complete if streets will be closed four (4) hours or more. Include detailed map of street and areas where "no parking" signs will be placed.

Streets, sidewalks or parks to be closed:

Traffic cones or barricades needed: () No () Yes

Will any items be placed on the sidewalk: () No () Yes

Food Service and /or Temporary Structures

Will food be served: () No () Yes Will a canopy, tent, or inflated device be utilized at the event? () No () Yes

Clean Up Procedures

Person or business responsible for clean up: _____

Address: _____

Phone: _____ E-mail: _____

Date and time clean up will be completed: _____

Alcohol

If alcohol will be present at the event, you are required to obtain the appropriate liquor permit from the Town Clerk.

Insurance

I understand I will need to possess or obtain public liability insurance to protect against loss from liability imposed by law for damages on account of bodily injury and property damage arising from the specified event. Insurance coverage is required as a condition of an event on Town property with a minimum limit of \$300,000 per occurrence. Such insurance shall name on the policy or by endorsement as additional insureds, the Town of Basin, including its officers, employees and agents.

Agreement

I understand and will comply with the conditions of this permit. If I fail to answer all questions completely and accurately, this permit will not be approved. I understand that an approved permit may be cancelled at the discretion of the Town, the Police Department, or the Fire Department for failure to obey the terms of the permit.

Applicant Signature: _____

Date: _____

City Official Signature: _____

Approved: **Denied:** **Date:** _____

