

l.	General Event Informa  EVENT NAME:				
	EVENT DATE:	SECONDARY D	ATE:		
	EVENT LOCATION:				
	If this is a parade or road race event: Attach a full route description and map.				
	EVENT TIME:	SECONDARY T	IME:		
	EVENT SET UP TIME: _				
	EVENT DISMANTLE TII	ME:	<del></del>		
	ESTIMATED ATTENDANCE:				
	ESTIMATE BASED UPON:				
	CHILDREN PARTICIPATION:				
	COMPREHENSIVE GENERAL LIABILITY INSURANCE COVERAGE REQUIREMENTS				
	Attach proof of insura prior to event.	nce or applicable rider	– Must be submitted 3 (three) days		
II.	Applicant and Sponsor Sponsoring Organization:				
	NON-PROFIT: YES:	_ NO:			
	IF YES: 501C (3	): 501C (6):	PLACE OF WORSHIP:		
	APPLICANT NAME:		TITLE:		
	ADDRESS:				
	CITY:	STATE:	ZIP CODE:		
	PHONE:	EMAIL:			



ON-SITE CONTACT:		TITLE:
ADDRESS:		
CITY:	STATE:	ZIP CODE:
PHONE:	EMAIL:	
Brief Overall Event Description	•	EVENT:
LIST ANY STREET(S) REQUIRIN	G TEMPORARY STREET CLOSE DICATING BEGINNING AND E	Map Must be Attached) URES AS A RESULT OF THIS EVENT. NDPOINT OF THE CLOSING, DATE, DAY



V.	Event Details DOES THE EVENT INVOLVE THE SALE OF ALCOHOLIC BEVERAGE	S: YES:	_NO:		
	IF YES, HAS THE PROPER ABC PERMIT BEEN OBTAINED:	YES:	NO:		
	A GEOGRAPHIC AREA OF LOCATON OF ALCOHOL SALES MUST BE ATTACHED				
	DOES THE EVENT INVOLVE THE SALE OF FOOD:	YES:	_NO:		
	IF YES, HAS THE HEALTH DEPARTMENT BEEN NOTIFIED:	YES:	_NO:		
	HAVE THE CORRECT PERMITS BEEN OBTAINED:	YES:	_NO:		
	WILL THERE BE MUSICAL ENTERTAINMENT AT THE EVENT:	YES:	_NO:		
	IF YES, THE FOLLOWING INFORMATION MUST BE INCLUDED				
	NUMBER OF STAGES: NUMBER OF BANDS:				
	LOCATION OF STAGES:				
	WILL AMPLIFICATION BE USED:	YES:	_NO:		
	*** IF AMPLIFICATION IS USED YOU WILL BE REQUIRED TO ESTABLISH COMPLIANCE WITH THE TOWN OF FOREST CITY NOISE ORDINANCE**				
	DO YOU PLAN ON UTILIZING A TOWN OF FOREST CITY PROPERTY: YES: NO:				
	WILL THERE BE ANY TENTS/CANOPIES AT THE EVENT SITE	YES:	_NO:		
	IF YES – NUMBER OF TENTS:				
	WILL ANY TENTS EXCEED 400 SQUARE FEET IN AREA:	YES:	_NO:		
	DOES THE EVENT USE PYROTECHNICS:	YES:	_NO:		
	IF YES – ARE THE PROPER PERMITS IN PLACE:	YES:	_NO:		
	DETAILS OF PYROTECHNICS:				



WILL THE EVENT REQUIRE ELECTRICAL HOOKUPS:	YES: _	NO: _	
IF YES – NUMBER OF HOOKUPS			
WILL THE EVENT REQUIRE ACCESS TO WATER TAPS:	YES: _	NO: _	
WILL THE EVENT COORDINATOR PROVIDE PORTABLE TOILETS ATTENDANCE	FOR THE	GENERAL P	
IF YES – NUMBER OF UNITS LOCATION C	F UNITS _		
WILL ADMISSION FEES BE CHARGED FOR ATTENDANCE		YES:	NO:
WILL FEES BE CHARGED FOR VENDORS AT THE EVENT		YES:	NO:
WILL SIGNS OR BANNERS BE DISPLAYED AS PART OF THE EVE	NT	YES:	NO:
ADDITIONAL QUESTIONS HOW AND WHERE WILL PARKING FOR ATTENDEES BE PROVID	DED		
Note: Parking and buildings involved may be inspected.  Enforcement for compliance with ADA regulations.	ed by Towr	n of Forest	City Code
HOW WILL TRASH BE CONTAINED AND REMOVED DURING AT	ND AFTER	EVENT	
HOW WILL EVENT VOLUNTEER STAFF BE IDENTIFIED AS "EVE	NT STAFF"		



HOW WILL EVENT STAFF BE TRAINED FOR THEIR ROLE IN THE EVENT

#### VII. Special Information for Applicants

- DO NOT ANNOUNCE, ADVERTISE, OR PROMOTE YOUR EVENT UNITL YOU HAVE AN APPROVED AND SIGNED PERMIT
- YOU WILL BE REQUIRED TO NOTIFY PROPERTY OWNERS AFFECTED BY THE EVENT AT THE TIME A SPECIAL EVENT PERMIT IS ISSUED WITH A COPY OF ANY CORRESPONDENCE PROVIDED TO THE TOWN OF FOREST CITY
- NO PERMANENT ALTERATIONS MAY BE MADE TO ANY PROPERTY OWNED BY THE TOWN OF FOREST CITY. THIS INCLUDES BUILDINGS, STREETS, OR FIXTURES.
- THE APPLICANT SHALL BE RESPONSIBLE FOR HIRING AND PAYING OFF DUTY -LAW ENFORCEMENT OFFICERS OR FOREST CITY FIRE PERSONNEL OR REIMBURSING THE TOWN OF FOREST CITY THE COST OF PROVIDING SUCH SERVICES WITH ON-DUTY PERSONNEL, TO APPROPRIATELY PROVIDE PUBLIC SAFETY NEEDS.
- FOR FESTIVALS OR EVENTS, THE APPLICANT SHALL BE RESPONSIBLE FOR HIRING OR REIMBURSING THE TOWN OF FOREST CITY FOR PROVIDING CITY STAFF, INCLUDING BUT NOT LIMITED TO OFF-DUTY LAW ENFORCEMENT, EMERGENCY MEDICAL PERSONNEL, FIRE PERSONNEL, STREET DEPARTMENT PERSONNEL, OR PUBLIC WORKS STAFF.
- THE TOWN MANAGER, IN CONSULTATION WITH THE FOREST CITY POLICE DEPARTMENT AND THE FOREST CITY FIRE DEPARTMENT, SHALL DETERMINE THE NUMBER OF STAFF NEEDED TO APPROPRIATEY MONITOR STREET CLOSURES, INTERNAL SECURITY, FIRE SAFETY NEEDS, AND EMERGENCY MEDICAL TECHNICIANS NEEDED. ADDITIONALLY, WHEN THESE NEEDS SHALL COMMENCE AND END
- Town of Forest City Fee Schedule:
  - Event Forest City Police Officer \$50.00 / hour
  - Event Forest City Fire Department (fire protection) \$80.00 / hour (personnel)
    - \$\$175.00 / Hour (Apparatus Fee)
  - Event Forest City Fire Department (medical support) \$40.00 / hour
    - \$\$100.00 / Hour (Apparatus Fee)
  - o Event Forest City Street Department Support \$40.00 / hour
- Rutherford County Traffic Control Beadie Hollifield 828-980-2125
  - Fees to be set by Rutherford County Traffic / Crime Control



REQUEST FOR WAIVER OF FEES ASSOCIATED WITH SPECIAL EVENT		
0	EVENT NAME:	
0	WAIVER OF FEES JUSTIFICATION:	

<u>Special Event Permits must be submitted at least 60 days prior to the event (30 days for neighborhood street closings)</u>

#### **RETURN TO:**

Forest City Police Department
 187 S. Church Street

 Forest City, North Carolina, 28043
 ATTN: Chris LeRoy – Chief of Police

<u>chrisleroy@townofforestcity.com</u>

Chris Weeks – Assistant Chief of Police chrisweeks@townofforestcity.com



A.	**** FOR INTERNAL USE ONLY ****
	APPLICATION RECEIVED:
	RECEIVED BY:
	APPLICATION APPROVED DATE:
	APPROVED BY:
	TOWN OF FOREST CITY FEE WAVER:
	APPROVED BY:
	DATE OF APPROVAL:
	APPLICATIN DENIED:
	DENIED BY:
	REASON FOR DENIAL: