



SPECIAL EVENT PERMIT APPLICATION

Office Use Only	SEP#: _____
Received By: _____	Date: _____
Permit Fee: _____	Receipt #: _____

This application is for the Town of Providence Village Special Event Permit. An application for a Special Event Permit must be submitted to the Town Secretary a minimum of sixty (60) days prior to the date of the special event and a minimum of twenty-one (21) days prior to the date of a "block party" special event for consideration. Incomplete applications will not be accepted.

The permit fee described by the fee schedule shall accompany the permit application. A deposit MAY BE REQUIRED and will be returned after the event and once all the property is back to the original state. Proof of public liability insurance with minimum combined limits of one million dollars (\$1,000,000.00) may be required for large events. The Town reserves the right to close or cancel any Event that is in violation of any Town Ordinance or deviation of this application. The Town also reserves the right to close or cancel an Event if it is deemed that the event is unsafe for public participation.

If being held on a school district or home owner association property, written permission must be obtained from the respective ISD/HOA and provided with the application. This application will be reviewed by all necessary departments including Law Enforcement, Fire Marshal, Code Compliance, Administration and others as needed.

Name of event: _____

Full description of event: _____

Address/Location of event: _____

Start Date: _____ Hours of Operation: _____

End Date: _____ Hours of Operation: _____

Set-up Start Time: _____ Breakdown Finish Time: _____

Name of Applicant: _____

Phone: _____ E-mail: _____

Organization/Sponsor: _____

Organization Address: _____

Phone: _____ E-mail: _____



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Please respond to all applicable questions:

1. How many people are expected to attend the event?		
2. How many parking spaces are required for the event?		
3. Is the event open to the public?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
4. Will an admission be charged?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
5. Will food and/or beverage be consumed at the event?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
If yes, please describe:		
6. Will any street closures be necessary?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
<p>If yes, please attach a traffic control plan, which should include at a minimum:</p> <ul style="list-style-type: none"> <input type="checkbox"/> proposed street closures <input type="checkbox"/> desired location of barricades <input type="checkbox"/> number of impacted properties <input type="checkbox"/> street closure impact signature form <input type="checkbox"/> additional traffic control devices and signage necessary for the event <input type="checkbox"/> necessary law enforcement requirements <p>Please note: the rental of all traffic control devices and signage is the responsibility of the Event.</p>		
Restrooms: At least 1 restroom facility must be checked as "Yes" in questions 7 or 8 below. Portable restrooms are the responsibility of the Event.		
7. Will a location with permanent restrooms be available throughout the event?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
If yes, please provide the address(es):		
8. Will portable restrooms be available during the event?	<input type="checkbox"/> Yes	<input type="checkbox"/> No



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If yes, please provide the number and location(s):		
9. Will any vehicles be utilized in the event area?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
If yes, what types and for what purpose?		
10. Will alcohol be sold/served/distributed at the event? BYOB is "No", if participants are not selling, serving or distributing.	<input type="checkbox"/> Yes	<input type="checkbox"/> No
If yes, a minimum of two (2) Police Officers must be present, compensation to be paid by Event. All T.A.B.C. licensing and regulations apply and are the responsibility of the Event.		
11. Litter Control is the sole responsibility of the Event during and after the event. How many receptacles and/or dumpsters will the Event provide?	Receptacles:	Dumpsters:
12. How frequently will litter be removed?		

A sketch showing the location of the following items must be provided:

- The general location of the event
- Parking areas/spaces
- Tents, booths, or other structures to be used
- Location of food or beverage serving areas (*A separate Food Permit application and fee may be required for food vendors.*)
- Restrooms
- Loudspeaker
- Extra Lighting
- Trash receptacles/dumpsters
- Signs or Banners (separate permits are required)



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- Barricades (*A permit from the Texas Department of Transportation (TXDOT) may be required if the event is located adjacent to a state road.*)
- Animals, Rides, Bounce Houses, or other Recreational Activities

Acceptance and Agreement

I, _____, the Event Coordinator, certify that all of the information contained in this Special Event Application is true and correct and that any deviation from this Application could result in the Town closing or canceling the Event. I understand that a Special Event Permit must be issued by the Town prior to the occurrence of this Event. The issuance of that permit is contingent upon the Event Coordinator's compliance with the Special Event Application and acceptance of all listed stipulations of the Special Event Permit. Upon acceptance of this permit, it shall be construed that the provisions of this permit are acceptable to Event Coordinator and that it is his/her sincere intention to adhere to all of the requirements and conditions contained herein. Event Coordinator agrees to bear all costs associated with the operation and maintenance of the special event.

Signature: _____ Date: _____

STREET CLOSURE IMPACT SIGNATURE FORM



All property owners and/or tenants affected by the street closure **MUST** be contacted and informed of the proposed street closure, and a minimum of 51% must indicate their favor by completing the form below. If additional sheets are needed, please make additional copies of this form. A map of the impacted area should be available for inspection.

Name of event: _____

Address/Location of event: _____

Start Date: _____ Hours of Operation: _____

End Date: _____ Hours of Operation: _____

Property Owner	Property Address	Owner Signature	Initial One	
			Favor	Oppose



FOR STAFF USE ONLY

Effective Permit Duration

Date of Application: _____ Permit #: _____

Deposit Amount (if applicable): _____

Event Contingencies: _____

Address/Location of Event: _____

Start Date: _____ Hours of Operation: _____

End Date: _____ Hours of Operation: _____

Date Approved: _____ Completion Date: _____

Reviewed and Signed By (if applicable):

Law Enforcement: _____ Date: _____

Fire Marshal: _____ Date: _____

Code Compliance: _____ Date: _____

Town Secretary: _____ Date: _____

Town Manager: _____ Date: _____

Notes: _____

