

4800 SOUTH SERVICE ROAD BEAMSVILLE ON LOR 1B1

TEL: (905) 563-8205 FAX: (905) 563-6566

SPECIAL EVENT PERMIT APPLICATION

Special Event Permit Applications for private property must be submitted to the Planning and Development Department a minimum of 30 days prior to the start of the event.

EVENT INFORMATION

Event Name/Description		Date(s), Time of the Event/Duration of the Event		
Organization/Business		No of Expected Guests/Attendees		
Event Organizer/Contact		1		
Applicant's Address				
Email		Website		
Phone (Home)	Phone (Cell)		Fax	
Secondary Contact		Phone (Home)		Phone (Cell)
This event is: First Time held?	Annual 🗌	If Annual, ho	w many year	rs has the event been
Location(s) of Event				
Purpose of Event				
Contact information for person in cha	arge on event da	ay (please include o	onsite phone	number)

EVENT DETAILS

Please answer "yes" or "no" to the following and provide details where indicated:

Proposed Components	Yes	No	Details
Private Property			
Open to the Public			Specify
Road Closures Required			Provide details and maps
Alcohol at Event			Dates/Times
Installation of Tents, Stage or Portable Structures			Specify types and sizes Check with Building Staff to determine if a permit is required
Live Entertainment			Specify
Use of Amplified Sound System			Specify
Security Required			Specify
Exhibits or Competitions			Specify
Use of Outdoor Cooking Equipment			Specify
Food Concessions			Specify
Parade			Provide Parade Route/Map on separate sheet
Tournament in conjunction with the Event			Hockey, Soccer, Baseball, Other
Race, Run, Walk-a-thon			Attach a map and specific details of the road closure request (road names, dated, times, nearby businesses)
Lottery, raffle, 50/50 draw, Nevada tickets			Check with Corporate Services Department for required licenses/permits
Fireworks / Pyrotechnic Special Effects			Permit required from the Fire Department
Liability Insurance of \$2,000,000.			Attach Proof of Insurance

Please review the attached Special Event Checklist provided to ensure your application is complete.

SPECIAL EVENT AGREEMENT

I have read the terms and conditions as outlined and have fully disclosed all details and components of the proposed event and agree to the terms as outlined. I will abide by all conditions and regulations contained in the <u>Town's Special Event Guidelines</u> and the applicable policies, procedures and responsibilities outlined. I am aware that failure to comply as outlined could lead to cancellation of event approval at any time.					
Applicant's Signature	Date				
Owner's Authorization	Date				

The personal information on this form is collected under authority of the Municipal Act 2001, SO 2001, c.25, as amended. The information will be used for processing Special Event Permit Applications and will form part of a public record to be considered by Council in processing the application. Questions about this collection should be directed to the Corporate Services Department.

^{*}The digital printed signature is accepted as a signed document

APPLICATION CHECKLIST

Where applicable, copies of the following must be submitted to the Town. Please att much of the documentation as possible with the application. Final approval will not (applicable) documentation has been submitted.	•
Completed Special Event Permit Application Form and Fee	
Detailed Site Plan	
Schedule of Planned Events/Activities including dates/times/admissions	
List of Food Concessions/Vendors	
Temporary Road Closure Requests	
Insurance Certificate: minimum \$2,000,000 of general liability coverage Naming the Town as an additional insured	
Food Vendor Permit (Public Health)	
Special Occasion Permit (AGCO)	
Temporary Structure Permit	
Fireworks Application & Supplier Information	
Noise Exemption Request	
The full amount of any outstanding amounts owed to the Town as a result of a previously permitted Special Event.	