

**CITY OF WILLOW PARK
COMMUNITY DEVELOPMENT DEPARTMENT
SPECIAL EVENT PERMIT APPLICATION**

Date: _____

Applicants Name: _____

Applicants Address: _____
Street No. Street Name City State Zip

Applicants Telephone Number: _____

Date of Event: _____ Time: _____

Duration of Event: _____

Type of Event: _____

Location of Event: _____

Components of Event (Include Concessions, shows, etc.) List all vendors, type, business location, address & phone number (use additional paper if needed)

Details of Event: _____

Admission: ____ Yes ____ No Other Dues/Fees:(specify) _____

List Source of Electricity and/or Water: _____

Number of Port-A-Potties: _____

Will There Be Camping Tents, RVs, Motor Homes or Campers? _____

Projected Number of Attendees: _____

Number & Size of Dumpsters to be provided _____

Plans for Post Maintenance: _____

Type of Concessions: _____

No. of Concessions: _____
[each concession shall obtain a Temporary Health Permit from the City before serving food to the public]

Contact information for each concession: _____

_____ [attach separate pages if necessary]

Please provide a photo copy of the State Food Handler's/Food Managers card for each of the concession operators.

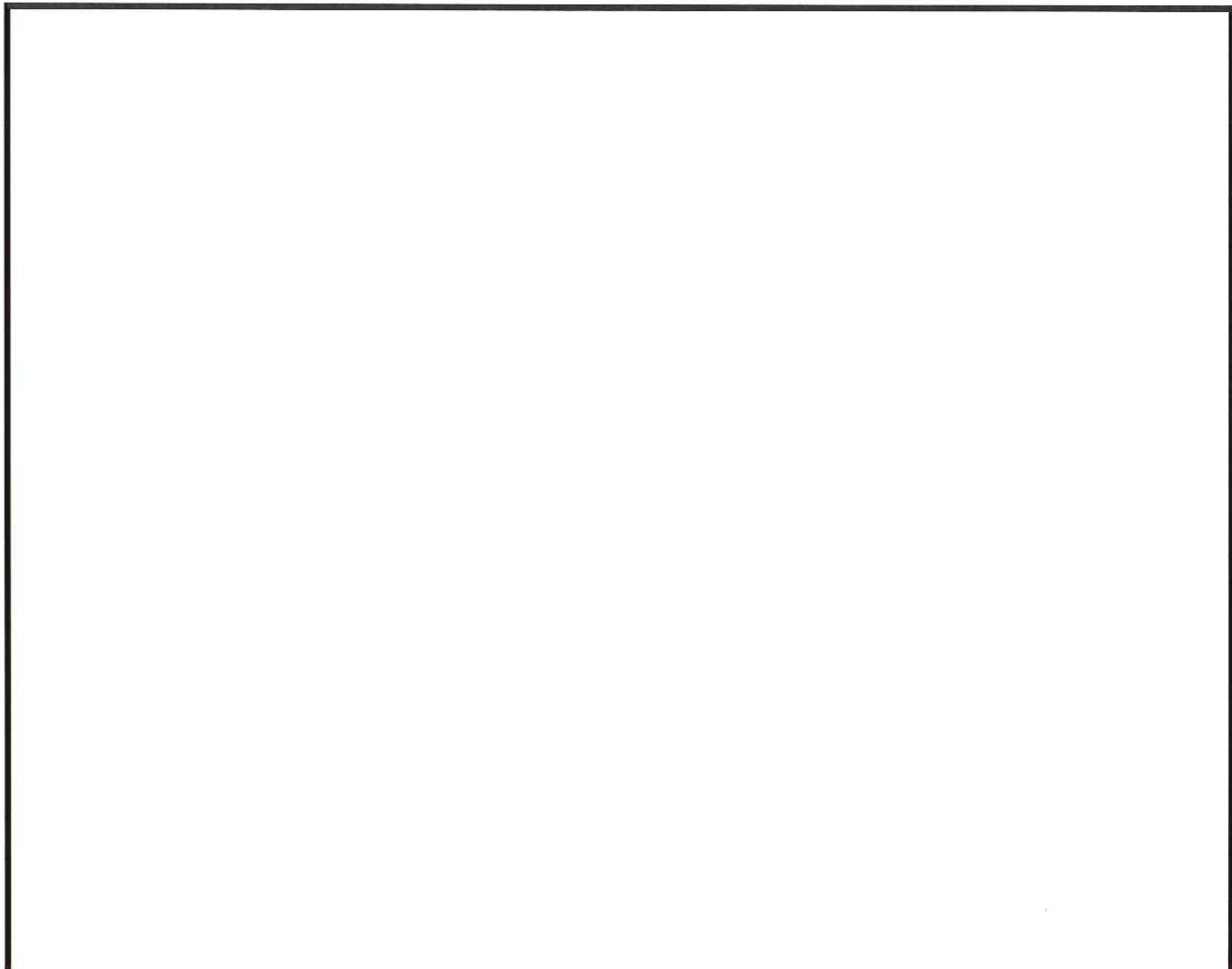
Please provide a detailed list of all foods to be served. List may be on attached on separate page.

Projected number of attendees: _____

Please explain how citizen and/or attendee complaints will be handled _____

Please provide a sketch of how the event will be arranged on the property. Show placement of all buildings, lights, Port-s-Potties, stages, stands, ingress and egress.

[may attach separate pages if necessary]



The undersigned does hereby solemnly swear that the above statements concerning this application are true and further agrees to notify the City of Willow Park within 3 days of any changes made.

Signature of Applicant: _____

Signature of Applicant: _____

Permit expires at the end of each scheduled event or thirty (30) days, whichever comes first. After thirty (30) days, applicant may renew this permit for an additional thirty (30) at a fee of \$35.00.

Upon review of the application, a bond or deposit may be required to provide for additional services resulting from this Special Event. A copy of **Liability Insurance** is required from applicant along with a **copy of Driver's License**.

Permit Number: _____ Permit Fee: \$75.00 _____

After submission of this application the following City departments will review your application before approval:

City Administrator: Recommended: Approve / Deny

Comments: _____

Building Dept: Recommended: Approve / Deny

Comments: _____

Fire Dept: Recommended: Approve / Deny

Comments: _____

Police Dept: Recommended: Approve / Deny

Comments: _____

Health Inspector: Recommended: Approve / Deny

Comments: _____

The City Council of the City of Willow Park hereby Approves / Denies the above application for Special Event Permit.

Ayes _____

Nays _____

Abstain _____

Approved / Denied on _____ day of _____, 20__.