



APPLICATION FOR SPECIAL EVENT PERMIT

Event Name: _____

Event Start Date: _____ Event End Date: _____

Event Location: _____

Event Hours: _____

Event Description & Activities: _____

APPLICANT INFORMATION:

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone #: _____ Cell #: _____

Fax #: _____ Email: _____

PRIMARY CONTACT INFORMATION FOR THE EVENT (If not the applicant)

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone #: _____ Cell #: _____

Fax #: _____ Email: _____

ADDITIONAL EVENT PARTNER OR SPONSOR INFORMATION (use additional sheets if needed)

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone #: _____ Cell #: _____

Fax #: _____ Email: _____

Event Category: Community Festival Concert Circus Bike Race/Tour
(check all that apply) Athletic Event Run/Walk Parade Carnival/Fair

Event Admission/Entry Fee: In Advance: _____ Day of: _____

Overall Attendance Estimate: _____ Largest One-time Attendance Estimate: _____

Does the event involve the sale and/or consumption of food? Yes No

_____ # of vendors _____ # of vendors needing water _____ # of vendors needing electricity

Cooking Method(s) Charcoal Gas/Propane Electric Other _____

Does the event involve the sale and/or consumption of alcohol? Yes No

If yes, please contact the Texas Alcohol Beverage Commission for a temporary alcohol permit.

Does the event involve any entertainment? Yes No

If yes, please describe the entertainment. _____

Event Venue Set-Up Date: _____ Set-Up Start Time: _____ Set-Up Finish Time: _____

Event Venue Break-down Date: _____ Break-down Start Time: _____ Break-down Finish Time: _____

Requested City Street(s) Closure: _____

Proposed Date and Time of City Street(s) Closure: _____

EVENT EQUIPMENT/ELEMENTS YOU WILL BE PROVIDING:

(Check/Complete all that apply)

Dumpsters: Yes No Quantity: _____

Portable Toilets: Yes No Quantity: _____

Trash Cans: Yes No Quantity: _____

Recycling Containers: Yes No Quantity: _____

Banners or Signs: Yes No Quantity: _____

Fencing / Barricades: Yes No Quantity: _____

Special Lighting: Yes No Describe: _____

Site Decorations: Yes No Describe: _____

Security: Yes No Quantity: _____ Describe: _____

Traffic Control: Yes No Describe: _____

Stage/Bleachers/Other: Yes No Quantity: _____ Describe: _____

Event Website or Phone #: Yes No URL or Phone # : _____

Fireworks/Fires/Pyrotechnics: Yes No Describe: _____

Fireworks Contractor: _____ Phone #: _____

Booths/Exhibits/Displays: Yes No Quantity: _____ Describe: _____

Tents or canopies: Yes No Quantity: _____ Size/Sq. Feet: _____

Vehicles/Trailers: Yes No Quantity: _____ Describe: _____

Animals: Yes No Quantity: _____ Describe: _____

VIP Area: Yes No Describe: _____

Amplified Music/Sound: Yes No Describe: _____

Rides/Inflatables/Other Amusements Items: Yes No Quantity: _____ Describe: _____

EVENT EQUIPMENT/ELEMENTS NEEDED FROM THE CITY OF WHITEHOUSE:

(Check/Complete all that apply. Fees will vary.)

Electrical Service: Yes No Quantity: _____ Describe: _____

Water Service: Yes No Quantity: _____ Describe: _____

First Aid Service: Yes No Describe: _____

Crowd Control Barricades: Yes No Quantity: _____ Describe: _____

Unique Grounds Prep: Yes No Describe: _____

Traffic Control: Yes No Describe: _____

Security: Yes No Quantity: _____ Describe: _____

Other City Services: Yes No Describe: _____

EVENT MERCHANT & VENDOR INFORMATION

Merchandise Sold at Event: Yes No _____ # of vendors needing electricity

Other Items/Services Sold at Event: Yes No _____ # of vendors needing electricity

Describe Items/Services: _____

Describe your plans for crowd control, Police, Event Security, First Aid Services and Disabled Parking.

Outline in detail the duties your events staff will perform during the event. Include such items as staffing entry and exits points, beer/wine garden area(s), stage area(s), clean-up of debris & litter during and after the event, supervision of parking areas, etc. How many event staff members will you have on site during the event and how you will obtain these event staff.

Describe your plans for notifying residents and businesses whose traffic patterns & operations will be affected by your event.

Describe your plans for marketing & promoting your event. Include information on all media & other sources of promotion.

LIABILITY INSURANCE INFORMATION

A Certificate of Insurance for the event must be presented to the City of Whitehouse no later than 15 business days prior to the start date of the event. If the information requested below is not available at the time of application submittal it can be added later but NO LATER THAN THE 15 DAY DEADLINE previously noted.

Insurance Agency: _____ Agent's Name: _____

Address: _____ Phone #: _____

Policy #: _____ Policy \$ Limits: _____

SITE PLAN REQUIRED:

Requirements:

Two copies drawn to scale showing:

- | | |
|--|---|
| <input type="checkbox"/> Location of adjacent structures | <input type="checkbox"/> Location & size of parking spaces |
| <input type="checkbox"/> Location of points of ingress/egress | <input type="checkbox"/> Electric transmission & distribution lines on site |
| <input type="checkbox"/> Location of fire hydrants | <input type="checkbox"/> Location & size of signs |
| <input type="checkbox"/> Location of fire lanes for use by emergency equipment with minimum width of 20' & height clearance of 14' | <input type="checkbox"/> Location of sanitary facilities & trash containers |
| | <input type="checkbox"/> Area designated for alcohol sales and/or consumption (if applicable) |

Applicant is responsible for contacting the departments for inspections. If defects are found those must be corrected prior to issuance of the permit.

Fire Inspection (903) 839-4914 ext *233

Approved by: _____ Date: _____

Comments: _____

Police Inspection (903) 839-2828

Approved by: _____ Date: _____

Comments: _____

Public Works & Utilities (903) 839-4914 ext *232

Approved by: _____ Date: _____

Comments: _____

Building Inspection (903) 839-4914 ext *224

Approved by: _____ Date: _____

Comments: _____

Health Department (if applicable) (903) 535-0030

Approved by: _____ Date: _____

Comments: _____

INDEMNITY AGREEMENT:

In consideration for the City of Whitehouse granting the undersigned Event Organizer representative permission to hold the proposed event on public property to display, sell or offer for sale wares, services, and/or food or merchandise within the perimeters of their event venue, the undersigned agrees to assume the defense of an indemnify and save harmless the City, and shall pay all attorney's fees, court costs and other costs incurred in defending such claims, which may accrue against, be charged to, be recovered from or sought to be removed from the City, its employees, officers and agents by reason of or on account of any personal injury or death to any individual(s) or damage to property, both real and personal arising from the undersigned's event and associated activities, if such personal injury or death or damage or property is caused by the acts or omission or negligence of any other person subject to the undersigned's control or associated with the event subject of this agreement. The City, its employees, officers and agents shall not have to give the undersigned any specific types of notice of such claims.

Witness the following signature (Event Organizer signature)

_____ (print)

_____ (signature)

Witnessed by:

_____ (print)

_____ (signature)

AFFIDAVIT OF APPLICANT:

I certify that the information contained in the Application for Special Event Permit is true and correct to the best of my knowledge and belief that I understand, and agree to abide all regulation, provisions and rules governing Special Events as set forth by the City of Whitehouse. That I understand that this Application is made subject to the rules and regulation established the Whitehouse City Council. I agree to abide by these rules and further certify that, on behalf of the organization, I am authorized to commit that organization, and therefore agree to be financially responsible for any cost and fees that may be incurred by or on behalf of the Event to the City of Whitehouse.

Applicant

Title (Print or type)

Signature of Applicant (Event Organizer)

Date of Application