



# SPECIAL EVENTS PERMIT APPLICATION

**EVENT NAME:**

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**EVENT APPLICANT:**

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**ADDRESS:**

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**CITY, STATE, ZIP:**

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**PHONE:**

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**EMAIL:**

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**EVENT DATE(S):**

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**EVENT START TIME:**

**EVENT END TIME:**

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**SET UP DATE & TIME:**

**TAKE DOWN DATE & TIME:**

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**EVENT MAIN CONTACT PERSON & PHONE:**

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**ON SITE CONTACT PERSON & PHONE:**

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**EVENT DESCRIPTION:**

**SIZE OF EVENT**

ESTIMATE THE NUMBER OF PEOPLE, ANIMALS, AND VEHICLES YOU BELIEVE WILL BE PRESENT AT THE EVENT. BASE YOUR ESTIMATE ON FACTORS SUCH AS PAST EXPERIENCE, SIMILAR PAST EVENTS AND THE AMOUNT OF ADVERTISING.

**EVENT VENDORS**

INCLUDE A LIST OF THE NAMES, ADDRESSES, PHONE NUMBERS, AND E-MAIL ADDRESSES OF ALL VENDORS, FOOD VENDORS, CONCESSIONAIRES AND ARCADE/RIDES SO THE CITY CAN DETERMINE THE APPROPRIATE PERMITS AND INSPECTION REQUIREMENTS. YOU MAY ATTACH AS A SEPARATE LIST.

**TENTS**

LIST ALL TENTS YOU INTEND TO USE. INDICATE THE SIZE, TYPE, AND PURPOSE OF EACH TENT. SPECIFY THEIR LOCATIONS ON THE SITE PLAN AND DESCRIBE IF THEY REQUIRE STAKES OR CAN BE ERECTED BY ANOTHER METHOD. PLEASE REVIEW TENT GUIDELINES ON PG. 5

**EQUIPMENT NEEDING UTILITIES**

PLEASE LIST THE EQUIPMENT TO BE USED AND THE UTILITY EACH PIECE WILL REQUIRE. SPECIFY WHETHER YOU INTEND TO USE CITY OF FRANKFORT POWER AND WATER OR SELF-CONTAINED SOURCES SUCH AS GENERATORS AND BOTTLED WATER.

**ELECTRICAL SOURCE**

INDICATE THE LOCATION OF THE ELECTRICAL SOURCE THAT WILL BE USED AT THE EVENT AREA. A LICENSED ELECTRICIAN IS REQUIRED BY THE CITY FOR ANY ELECTRICAL HOOK UP. IF APPLICABLE, PLEASE INDICATE THE NAME OF THE CERTIFIED ELECTRICAL CONTRACTOR AND THE LICENSE NUMBER (IF KNOWN).

**WATER SOURCE**

INDICATE THE LOCATION OF THE WATER SOURCE THAT WILL BE USED AT THE EVENT AREA.

**PARKING AND TRAFFIC PLAN**

INDICATE WHERE YOU INTEND PATRONS AND VENDORS TO PARK, WHETHER IT IS ON CITY STREETS, PARKING RAMPS, MUNICIPAL LOTS, OR PRIVATE LOT PARKING.

**STREET CLOSURE**

INDICATE IF THE EVENT REQUIRES ANY STREET CLOSURES. STREET CLOSURES REQUIRE BARRICADES AS PART OF THE SAFETY PLAN.

**PORTABLE TOILETS**

INDICATE IF PORTABLE TOILETS ARE NEEDED AND HOW MANY YOU INTEND TO PROVIDE. REFER TO GUIDELINES ON PG. 6

**ALCOHOLIC BEVERAGES**

IF ALCOHOLIC BEVERAGES WILL BE SERVED, THE EVENT APPLICANT IS RESPONSIBLE FOR OBTAINING ANY APPLICABLE STATE AND LOCAL LICENSES, WHICH MUST BE DISPLAYED AT THE EVENT. PLEASE GIVE THE NAME ABC LICENSES HAVE BEEN OBTAINED UNDER AND PROVIDE A COPY AS AN ATTACHMENT.

**SECURITY PLAN**

IDENTIFY ALL PUBLIC SAFETY PERSONNEL (PRIVATE SECURITY, POLICE, EMS), WHICH WILL BE USED, IF ANY. IF A PROFESSIONAL SECURITY COMPANY OR LAW ENFORCEMENT AGENCY IS USED, PLEASE LIST THE COMPANY NAME, CONTACT PERSON AND PHONE NUMBER.

## ADVERTISING PLAN

DESCRIBE HOW THE EVENT WILL BE ADVERTISED AND WHICH PUBLIC MEDIA OUTLETS WILL BE UTILIZED. REFER TO GUIDELINES ON PG. 8

## WASTE MANAGEMENT PLAN

INDICATE WHAT WASTE WILL BE GENERATED FROM THE EVENT, AND HOW TRASH AND RECYCLING WILL BE HANDLED. AFTER CONTACTING CITY OF FRANKFORT DIVISION OF SOLID WASTE, PLEASE INDICATE THE NUMBER OF TRASH AND RECYCLING CARTS THAT WILL BE USED

## SITE PLAN

THE EVENT APPLICATION MUST PROVIDE THE CITY WITH A DETAILED LAYOUT OF THE EVENT, WHICH SHOWS THE LOCATIONS OF ALL EVENT COMPONENTS. PLEASE CREATE THE SITE PLAN USING THE INSTRUCTIONS BELOW AND INCLUDE WITH THE APPLICATION PAGES.

SITE MAPS ARE RECOMMENDED SUCH AS THOSE OBTAINED FROM GOOGLE MAPS.

PLEASE INCLUDE A DETAILED LAYOUT OF THE EVENT AREA AND INDICATE THE LOCATION OF ALL OF THE FOLLOWING (IF APPLICABLE):

- STAGES
- TENTS
- POWER AND WATER SOURCES
- RIDES
- FOOD VENDORS
- RETAIL VENDORS
- ALCOHOL SALES
- PORTABLE TOILETS
- TEMPORARY TRAFFIC CONTROL DEVICES (BARRICADES, CONES, ETC.)
- PROPOSED PARKING
- FIRE VEHICLE AND RESIDENTIAL TRAFFIC ACCESS



