

SPECIAL EVENT PERMIT APPLICATION

APPLICANT INFORMATION			
Applicant Name		Organization Name	
Address		City	State
E-Mail Address		Web Site Address	
Telephone Number		Mobile Number	
Type of Organization <input type="checkbox"/> Individual <input type="checkbox"/> Charitable <input type="checkbox"/> Non-profit organization (501.C3 Tax Identification # _____) <input type="checkbox"/> For profit organization <input type="checkbox"/> Other _____			
On-site Contact		Mobile Number for On-Site Contact	

EVENT INFORMATION			
Event Name		Event Date(s)	Time
Type of Event: <input type="checkbox"/> Carnival <input type="checkbox"/> Fundraiser <input type="checkbox"/> Run/Walk (check all that apply) <input type="checkbox"/> Concert/Performance <input type="checkbox"/> Parade <input type="checkbox"/> Sports/Recreational <input type="checkbox"/> Festival <input type="checkbox"/> Private Gathering <input type="checkbox"/> Other _____ <input type="checkbox"/> Professional Filming <input type="checkbox"/> Reception _____			
Is this a first time event? <input type="checkbox"/> Yes <input type="checkbox"/> No		If No, date of previous event _____ What was past attendance? _____	
Is this event open to the public? <input type="checkbox"/> Yes <input type="checkbox"/> No		Admission/Entry Fee	Estimated Total Budget
Proposed Area <input type="checkbox"/> Full Park <input type="checkbox"/> Green-SE Quad <input type="checkbox"/> Vitruvian Park (See ACP Rental <input type="checkbox"/> Ellipse <input type="checkbox"/> East Garden Options Map. Check : <input type="checkbox"/> Green-NW Quad <input type="checkbox"/> Central Garden that apply) <input type="checkbox"/> Green-SW Quad <input type="checkbox"/> West Garden <input type="checkbox"/> Green-NE Quad <input type="checkbox"/> Bowl			
Setup: (first item to be loaded in on site) Date: Time:		Teardown: (last item to be removed) Date: Time:	
		Estimated Attendance Participants: Spectators: Est. # of Addison Hotel Rooms:	
Sponsor(s)		Beneficiary	

EVENT FEATURES

Will sound amplification equipment be used? YES / NO

Live Music YES / NO

Recorded Music YES / NO

Other (please describe) YES / NO

If yes, provide the following:

Sound System YES / NO Company _____

Lighting System YES / NO Company _____

Stage YES / NO Company _____

Dance Floor YES / NO Company _____

Will the event feature food/beverage service? YES / NO

Concessionaire/Caterer's Name/Telephone #

Will there be alcohol at the event? YES / NO

Will alcohol be sold? YES / NO

IF YES, WHO IS PULLING THE TABC APPLICATION?

Will alcohol be given away? YES / NO

How will the attendees over the age of 21 be identified?

Open Flames or Cooking YES / NO

Please show location of cooking areas on site plan

Vendors cooking with charcoal, wood or gas must have at least one 2.5 gallon water fire extinguisher nearby.

Type of Fuel

Gas

Electric

Charcoal

Other _____

Is the event closing, blocking or using public streets?

YES / NO

If Yes, a road closure plan complete with barricades and signage shall be submitted.

Street:

Festival Way

Addison Circle Drive

Other _____

Closing Day/Time Opening Day/Time

Tents YES / NO

Company / Contact:

Number of Tents/ Size(s)

Temporary Fencing YES / NO

Company / Contact:

Provide estimated dimensions of fenced area

Restrooms, Dumpsters, Sinks YES / NO	Company / Contact:	
Number of: _____ Portables _____ Restroom Trailers _____ Handwashing Sinks _____ ADA Portables _____ Dumpsters _____ Sizes _____ Hand Sanitizer Stations		

Trash Collection YES / NO	Company / Contact:	
	Number of Trash Workers	Hours

Electrical Services YES / NO	Company / Contact:	
	Supplemental Equipment: Generator(s) Provide Number _____ Light Tower(s) Provide Number _____ Space Lighting Provide Number _____	

Rentals (tables, chairs, linens, etc.) YES / NO	Company / Contact:	
	Number of : _____ Tables _____ Chairs _____ Other (specify) _____ _____ Other (specify) _____	

Professional Parking/Valet [] Yes [] No	Company / Contact:		
	Number of Parking Personnel	Hours	# of cars expected

Carnival/Amusement Rides and Attractions [] Yes [] No	Company / Contact:	
	Contact Name	Phone

Climate Control YES / NO	Company / Contact:	
	Type: [] Fan (pedestal fan, box fan, etc.) (check all that [] Misting Fan apply) [] Air-conditioning [] Heater(s)	

Pyrotechnics / Lasers / Special Effects YES / NO IF YES, PLEASE DESCRIBE IN DETAIL.		Company / Contact:	
		Company	
		Contact Name	Phone
Day/Time of Show	Length of Show (in minutes)	Products Used	Show Budget
Launch Location		FAA Clearance	Addison Airport Clearance

[illegible]

FOR OFFICE USE ONLY

Town of Addison Contact List		
Department	Contact	Email
Special Events		
Police		
Fire/EMS		
Environmental Health		
Public Works		
Parks		
Marketing		

Committee Review						
Event Name		Event Date (s)			Application Number	
Req'd.	Committee Signatures:	Approved as Submitted	Needs Modification	Approval Denied	Estimates Personnel / Equipment Expenses	Comments: (Submit additional Page if necessary)
	Special Events:					
	Police:					
	Fire / EMS:					
	Environmental Health:					
	Public Works:					
	Parks:					
	Marketing:					

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Event Application Status		
Final Approval Issued On		
Approval Issued By		
Notification Issued On		
Estimate of Charges Issued		
Insurance Certification		
Temporary Food Service Permit		
Site Plan		
Parking Plan		
Event Contingency & Emergency Action Plan		
Committee & Town Meeting		
Final Payment Received		
Event Walk Through		
Set Up Begins		
Tear Down Completed		
Post Event Walk Through		
Damages to the Park Addressed		
Restoration Fee Sent Out		
Restoration Fee Received		
Event Recap Received		
Approved to return for future events?	Yes	No

Event Contingency and Emergency Action Plan



The Town of Addison and the Addison Fire Department want to help you have a safe event. Unfortunately, not every event runs smoothly. Severe weather such as thunderstorms, including lightning, heavy rain and hail, are sometimes a possibility; and a medical emergency is unforeseen. Occasionally, incidents occur that are beyond the control of the planning team. Therefore, having a Contingency Plan for the event is an important tool that not only brings awareness, but provides vital information among all parties, including event organizers and those who may respond to an emergency during the event.

Please take a moment to complete this Contingency Plan form. This information will be shared with the Addison Fire Department for their files in the event an emergency arises.

Site/Location of Event:

Event Name:

Date(s) Reserved: SU M T W TH F SA

Approximate # of Attendees:

Event Start Time: am pm Event End Time: am pm

Event Point of Contact:

Contact Phone#: Alternate Phone #:

Contact Address:

Contact Email:

Contingency Plan Questions - PART I (Weather)

What weather conditions may require cancellation of the event?

What weather conditions will postpone the event?

How will storm warnings be monitored?

What plans are in place for sudden, severe weather conditions, such as thunderstorms? What type of shelter will be available?

Who has the authority to make these decisions, and at what point do they exercise that authority?

How will notification be made of a cancellation or postponement to event attendees and Town staff?

Contingency Plan Questions - PART II (Emergency Responders)

Used to allow responders to precisely and quickly identify the location of an emergency.

Is access to, and the road network within the site, adequate to prevent emergency responders from having to walk significant distances to the principal spectator area(s)?

Once on the site, is there sufficient room, i.e. for staging, maneuvering, etc. to permit repositioning or redeployment of emergency vehicles as dictated by the incident?

Due to the nature of road access, would early arriving vehicles, such as ambulances, be prevented from leaving by gridlock produced by subsequently arriving equipment?

Does an access road or street that could be closed to the public and used only for expeditious emergency and service vehicle ingress and egress serve the site?

Have you advised ambulance services and local hospitals of the nature of the event, provided an expected spectator profile, and estimated potential medical problems?

Have you notified fire and rescue services of the nature of the event and identified the services that might be required?

Are additional security personnel, including police, on standby or on-call should an immediate increase in these services be required?

Contingency Plan Questions - PART III (Transportation and Crowd Control)

What impact will weather conditions have on transportation?

What type of road(s) lead to the event (paved, gravel, dirt, etc.)?

Is the surrounding road network able to handle the anticipated spectator vehicular traffic?

If spectator-parking areas are filled, will the road network allow continued vehicle flow, thus preventing gridlock?

Are communications systems inside and outside the venue capable of providing public announcements, marshaling instructions, and evacuation orders?

Is a system in place to monitor crowd flow (such as through the use of spotters or aviator resources)?

Have arrangements been made for access and egress routes for people with disabilities?

Have arrangements been made for pedestrian access, including considerations of distance, terrain, surface, and lighting?












If buses are in use, are there designated pick-up and set-down points?

Where there may be health and safety implications, efficient management of crowd movement includes:

- Awareness of public transport congestion at road and railways
- Use of buses to reduce private vehicle traffic and any potential problems which large vehicles may present, for example: access difficulties, parking requirements, potential road blockages
- Alterations to normal traffic and road use
- Traffic control
- Adequacy of the surrounding road network to handle the anticipated spectator vehicular traffic before, during, and after the event
- Accommodation for safe pedestrian and bicycle traffic around event
- Communication between traffic management groups and other services, including the local media.

If you would like more information on pre-event planning for potential risks and hazards, please visit the FEMA website at: <http://www.fema.gov/plan/index.shtm>

Addison Circle Park Map Template

-  Restrooms
 -  Water
 -  Parking
 -  Trash Can
 -  Kiosk
 -  Sanitary Sewage Hookups
 -  Benches
 -  Outlet
-  10x10
 -  10x20
 -  20x20



Applicant must submit an initial site plan of the event, showing all temporary installations, road closures, parking and directional signage. The event site plan should be a detailed drawing (preferably a computer-generated image) from an aerial perspective drawn to scale.

