Date Application Received:

Permit Number:



APPLICATION FOR SPECIAL EVENT PERMIT

Please return completed application form with permit fee and paperwork to:

Events Coordinator, Town of Beaufort 701 Front Street P.O. Box 390 Beaufort, NC 28516 Phone: (252) 728-2141 Email: <u>r.johnson@beaufortnc.org</u>

Applications submitted late or incomplete may not receive approval and may not be issued a permit.

EVENT BASICS

Event Name: ______

Location of Event Site: ______

(If more than one site is being requested please be specific and list each one individually below)

| Run by: | | |
|-----------------------------|-----------|--|
| Applicant (Organizer) Name: | Contact # | |
| Day of Event Contact #: | Email: | |
| Type of Event: | | |
| o Festival | | |

- Parade
- o 5K Race
- 10K Race

| - |
|-------------------|
| Time of Event: |
| _ Start Time: |
| _ End Time: |
| _ Admission Fees: |
| |
| |
| |
| |

ORGANIZER/APPLICANT INFORMATION

| Name of Organization: | |
|---|---|
| Primary Contact Person: | |
| Mailing Address: | |
| Email: | |
| Daytime Phone #: | _Cell Phone #: |
| Alternate Contact Person: | Phone #: |
| Is your group a non-profit organization?your application. | If yes, please provide documentation with |

SITE PLAN

Site Plan Attached

- o Yes
- 0 **No**

(If you need help, please set up a meeting with the Town of Beaufort's Events Coordinator)

A detailed site plan must be included with your event application. The following, should they be relevant, must be included in your Site Plan.

- Location of all tents and temporary structures
- Location of requested barricades and road closures
- Emergency exits
- Fire extinguishers, propane storage
- Location of command post, medical & first aid station, emergency vehicle access points and all exits and entrances (both emergency and for the public)
- Fencing, staging, bleachers, stages, inflatables, etc.
- Food/refreshment tent vendors, refreshment tents
- Food Trucks
- Location of Restrooms
- 5K/10K race routes

If the Site Plan is not submitted with the event application, the deadline is 45 days before the event, otherwise a permit will not be issued.

PARKS & PARKING LOTS REQUESTED

Please mark all that apply:

- o East Parking Lot
- West Parking Lot
- o Craven Street Parking
- Middle Lane
- o John Newton Park
- Lynn Eury Park
- o Grayden Paul Park
- Topsail Marine Park
- Other Please list: ____

Specific Requirements: (Extra trash cans/recycling/electrical etc.) Please be specific and include each item on the Site Plan for the desired location. Please note extra charges may apply in accordance to the fee schedule. (Trash/Recycling Carts: \$10 each, Electricity: \$50)

Please provide the name and contact information of all outside companies who are providing services during your event. IE: Tent Rentals, Inflatable Rentals, Port-A-Pottie Rentals, etc.

Will there be canon/re-enactment fire during your event? _____ If yes, please coordinate with the Beaufort Fire Department for safety procedures.

ALCOHOL

Alcohol at the event YES _____ NO____ Attach all required paperwork. Applicant is responsible for obtaining applicable ABC License and Liquor Liability Insurance. Applicant must provide a clearly marked and contained area for alcohol consumption and hire two Town of Beaufort police officers at a rate of \$50 per hour for the duration. (The Police Chief will review the application for exceptions.) All local, state and Federal laws must be adhered to. *I/we have read, understand and will comply with the rules outlined by the Town of Beaufort in the Town Code of Ordinances as well as in the Event Procedures.*

<u>x</u>_

_____ (Applicant's Signature)

ROAD CLOSURES

Does your event require a road closure? _____YES ____NO

Please provide specifics below:

| Road | Set-Up Time | Event Start Time | Finish Time | Tear Down Time |
|------|-------------|------------------|-------------|----------------|
| | | | | |
| | | | | |
| | | | | |
| | | | | |

If a road closure has any impact on area businesses and/or residents, the applicant will be required to inform all residents and/or businesses in the area of the road closure, by letter or hand-delivered flyer at least 14 days in advance of the event, of the particulars of the approved temporary road closure and any detour route available.

Emergency Vehicle Access Requirements: A road may be closed to regular traffic during an event, but an unobstructed fire lane must be left open at all times for emergency vehicles.

Parking lots required for Event set-up: (Please mark on the site map if applicable) (Please note charges may apply. The rate is \$18 per day per space in the East & West parking lots and \$9 per on street parking space per day for special event closure during Pay-To-Park season).

Please list all parking lots and spaces you are requesting. Spaces are numbered so please be specific. Also please note that parking space closures MUST be approved by the Board of Commissioners. Event organizers are not permitted to acquire additional spaces without Town permission prior to an event.

Please list off-site Parking Location for Vendors & Event Staff: A letter of permission is required for the use of private property per the event procedures. Please include this with your event application.

Bicycle Parking: Yes_____ No _____

Additional Handicap Parking: Yes ______ No _____ Location: ______

Event Parking: (Please outline your plan for day of parking for event attendees. Please include parking lot locations and the name/contact information for any shuttle/trolley service):

PARADE/WALK INFORMATION

| Parade Assembly Area: | Time: |
|------------------------|-------|
| Parade Dismissal Area: | Time: |

EMERGENCY MANAGEMENT

Route Map Attached: ______ YES _____ NO (Please note a route map is required)

Designated Emergency personal/liaison (onsite): _____

Parade Start Time: _____

Cell #: ______ Other Contact: ______

How will your event staff react to severe weather?

How will you alert visitors to the event to evacuate the site? (If multiple sites are being requested, a plan must be submitted for each location)

RISK ASSESSMENT

It is important for Event Organizers to identify risks and hazards associated with their event and know how to prevent these risks. Please identify possible risks for your event and list below (weather, food, fire, etc.) Please provide details.

What training will you provide to your volunteers/staff/participants regarding emergencies?

TENTS

Will you have tents at your event? _____YES _____NO

Please list the tent sizes: _____

If your event includes tents, you must make arrangements with the Beaufort Fire Department for a tent permit. There is a \$50 fee. Please contact Tammy Turek at (252) 728-4325 to make arrangements. The Tent Permit Application and a list of requirements are available online at <u>www.beaufortnc.org</u>.

FOOD

Will there be food served at your event? _____YES _____NO

If yes, please provide a detailed list of all food vendors.

If yes, have you contacted the Carteret County Health Department to set up inspections? _____YES ____NO

All food vendors must have proper licensing, inspections, etc.

Will there be vendors selling items at your event? _____Yes _____No

Please note vendors are only permitted to sell during the event hours listed on this application. Any vendor selling before or after the listed hours is in violation and subject to being shut-down.

All vendors must have proper certifications and licenses. They must display the required state sales and use tax information and the event organizer must keep all of this information on file pursuant to North Carolina State laws.

CHECKLIST

Please submit the following documents with your event application. Once all forms (if applicable) are received and the event is approved an Event Permit will be issued.

- Tent Permit 0
- Detailed Site Plan
- Detailed Route Map (Parade/5K/10K) 0
- Map of Road Closures
- ABC Permit 0
- 0 Health Inspection Documentation
- 0 Insurance
- Non-profit documentation 0
- Private property parking permission letter 0
- List of food vendors
- List of vendors 0
- Application Fee
- Application Signature I/We the event organizer _____

, on behalf of

_, the party requesting the use of the Town of Beaufort facilities noted in the above application do hereby hold and save harmless and agree to indemnify the Town of Beaufort and its elected officials, directors, officers, employees, servants, agents, contractors and their respective heirs, executors, successors with respect to any and all liability, actions, debts, suits, demands, costs, damages and expenses whatsoever arising wither directly or indirectly as a result of the use of the Town of Beaufort's facilities, park, road or other and in accordance with the provisions contained in this policy. I/We have read and understand this application, the event procedures and the requirements placed upon this applicant and organization. I agree to abide by the Town of Beaufort rules, regulations and ordinances.

Applicant's Signature _____ Date _____

Internal Use Only

Permission is granted to the applicant and/or sponsoring organization to use the streets/facilities/parks as listed in the application for the special event described.

Permit Issue Date: Authorized Signature:

| Insurance Certificate: Yes | No |
|----------------------------|----|
| Permit Fee: Yes | No |
| BOC Approval Date: | |
| Police Chief Approval: | |
| Fire Chief Approval: | |
| | |