

Outdoor Event Permit Application

Applicant Information

Organization/Applicant Name

Contact Person

Phone

Email

Event Details

Event Name

Event Date

Event Time e.g. 10:00 AM - 4:00 PM

Expected Attendance

Event Location/Address

Set-Up Date/Time e.g. 9:00 AM, June 10

Event Description

Logistics

Type of Permit Requested

Security / Emergency Plan

Certificate of Insurance Policy # / Provider

Special Requirements

Applicant Signature

Signature

Date