



Town of Greentown Special Event Application

Must be submitted a minimum of 8 weeks prior to event.

A Special Event Permit is required for an event that will be held on or require the use of either Town of Greentown owned property, public streets, right of ways, and/or any special event on commercial/business property that would fall outside of the normal day to day operations of the business.

Please note: Some events will also require a State Issued Amusement and Entertainment Permit (Contact Indiana Department of Homeland Security for details; online application can be found at www.in.gov/dhs/2795.htm. *Allow at least 4 weeks to obtain.*

Applicant Information - Organization

Address

Email

Contact Name *(must be present at event)*

Phone Number

Event Information

Name of Event

Will your event include:

Closure of Public Streets or Public Property

If yes, provide detailed site plan map

Yes

No

Concerts / Live Music

If yes, provide proof of license if using copyrighted music

Yes

No

Tents

If yes and greater than 10x10', contact DHS

Yes

No

Inflatables, obstacles, rock walls, etc.

If yes, must be listed on insurance

Yes

No

Food Service Yes No
If yes, must be inspected by Howard County Health Dept.

Fireworks, lasers, pyrotechnics Yes No
If yes, contact Greentown Volunteer Fire Dept

Alcohol Yes No
If yes, contact ATC

Portable Toilets Yes No
If yes, no dumping into Greentown WWTP collection system

Electricity/Generator Yes No

Event Description:

Event Logistics

Location

Estimated Attendance

Estimated Number of Vendors

Event Start Date

Start Time

Event End Date

End Time

Setup date & time

Tear down date & time

Please describe your plan for cleanup and removal of trash during and after your event.

Public Services Requested

Please identify any public services including street closures and traffic control, electric service, etc. that you may need for your event:

- | | | |
|-------------------------|------------------------------|-----------------------------|
| Street or alley closure | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Event Barricades | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Traffic control | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| EMS presence | <input type="checkbox"/> Yes | <input type="checkbox"/> No |

Please describe any food or concession prep areas and/or alcohol sales and consumption planned for your event and attach a copy of your liquor license to the application.

You are required to provide portable restroom facilities at your event, unless you can substantiate the availability of both ADA accessible and non-accessible facilities in the immediate area which will be available to the public during your event. If you will not be providing portable restrooms, please attach a description of the facility plan.

Event Attachments (please attach and check the required documentation applicable to your event.)

	Attached	N/A
Event Route/Site Plan	<input type="checkbox"/>	<input type="checkbox"/>
Vendor List	<input type="checkbox"/>	<input type="checkbox"/>
Agenda/Proposed Activities	<input type="checkbox"/>	<input type="checkbox"/>
Performer List	<input type="checkbox"/>	<input type="checkbox"/>
Security Plan	<input type="checkbox"/>	<input type="checkbox"/>
Location of Stage	<input type="checkbox"/>	<input type="checkbox"/>
Parking Plan	<input type="checkbox"/>	<input type="checkbox"/>
Copy of Alcohol Beverage permit	<input type="checkbox"/>	<input type="checkbox"/>
Copy of Insurance with Town listed as co-insured	<input type="checkbox"/>	<input type="checkbox"/>
Copy of Health Department Approval (if serving food)	<input type="checkbox"/>	<input type="checkbox"/>
Copy of notice to public of intended closures	<input type="checkbox"/>	<input type="checkbox"/>
Description & Locations of Signage/Banners	<input type="checkbox"/>	<input type="checkbox"/>

Other attachments: (please list)

Signature *(must be present at event)*

Date