

General Event Information EVENT NAME:	
EVENT DATE: SECONDARY DATE:	
EVENT LOCATION:	
If this is a parade or road race event: Attach a full route description and map.	
EVENT TIME: SECONDARY TIME:	
EVENT SET UP TIME:	
EVENT DISMANTLE TIME:	
ESTIMATED ATTENDANCE:	
ESTIMATE BASED UPON:	
CHILDREN PARTICIPATION:	
COMPREHENSIVE GENERAL LIABILITY INSURANCE COVERAGE REQUIREMENTS	
Attach proof of insurance or applicable rider – Must be submitted 3 (three) days prior event.	· to
Applicant and Sponsoring Organization Information sponsoring organization:	
NON-PROFIT: YES: NO:	
IF YES: 501C (3): 501C (6): PLACE OF WORSHIP:	
APPLICANT NAME: TITLE:	
ADDRESS:	
CITY: STATE: ZIP CODE:	
PHONE: EMAIL:	
ON-SITE CONTACT:TITLE:	
ADDRESS:	
CITY: STATE: ZIP CODE:	
DUONE. EMAIL.	



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Street Closure Requests (<mark>Street Closure Map Must</mark> LIST ANY STREET(S) REQUIRING TEMPORARY STREET CLOSURES AS A RES	· · · · · · · · · · · · · · · · · · ·
STREET NAME(S) INDICATING BEGINNING AND ENDPOINT OF THE CLOSI	
TIME OF CLOSURE AND RE-OPENING	
Event Details	
Event Details DOES THE EVENT INVOLVE THE SALE OF ALCOHOLIC BEVERAGES: YES: _	NO:
DOES THE EVENT INVOLVE THE SALE OF ALCOHOLIC BEVERAGES: YES: _	NO:
DOES THE EVENT INVOLVE THE SALE OF ALCOHOLIC BEVERAGES: YES: IF YES, HAS THE PROPER ABC PERMIT BEEN OBTAINED: YES: A GEOGRAPHIC AREA OF LOCATON OF ALCOHOL SALES I	NO:
DOES THE EVENT INVOLVE THE SALE OF ALCOHOLIC BEVERAGES: YES: IF YES, HAS THE PROPER ABC PERMIT BEEN OBTAINED: YES: A GEOGRAPHIC AREA OF LOCATON OF ALCOHOL SALES I	NO:NO:NO:NO:
DOES THE EVENT INVOLVE THE SALE OF ALCOHOLIC BEVERAGES: YES: IF YES, HAS THE PROPER ABC PERMIT BEEN OBTAINED: YES: A GEOGRAPHIC AREA OF LOCATON OF ALCOHOL SALES I DOES THE EVENT INVOLVE THE SALE OF FOOD: YES:	NO: MUST BE ATTACHED NO: NO:
DOES THE EVENT INVOLVE THE SALE OF ALCOHOLIC BEVERAGES: YES: IF YES, HAS THE PROPER ABC PERMIT BEEN OBTAINED: YES: A GEOGRAPHIC AREA OF LOCATON OF ALCOHOL SALES I DOES THE EVENT INVOLVE THE SALE OF FOOD: YES: IF YES, HAS THE HEALTH DEPARTMENT BEEN NOTIFIED: YES: HAVE THE CORRECT PERMITS BEEN OBTAINED: YES:	NO: MUST BE ATTACHED NO: NO:
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*** IF AMPLIFICATION IS USED YOU WILL BE REQUIRED TO ESTABLISH COMPLIANCE WITH THE TOWN OF FOREST CITY NOISE ORDINANCE***



DO YOU PLAN ON UTILIZING A TOWN OF FOREST CITY PROPER	KIY: YES:	NO:		
WILL THERE BE ANY TENTS/CANOPIES AT THE EVENT SITE	YES:	NO: _		
IF YES – NUMBER OF TENTS:				
WILL ANY TENTS EXCEED 800 SQUARE FEET IN AREA:	YES:	NO: _		
WILL THERE BE ANY INFLATEABLES AT THE EVENT SITE YES: _	NO: _			
IF YES - WILL ANY INFLATEABLES EXCEED 400 SQUARE	FEET IN ARE	A: YES:		NO:
**IF YES – INFLATEABLES MUST BE INSPECTED BEFORE	E THE EVENT	BY FOR	EST CITY	FIRE & RESCUE.*
DOES THE EVENT USE PYROTECHNICS:	YES:	NO: _		
IF YES – ARE THE PROPER PERMITS IN PLACE:	YES:	NO: _		
DETAILS OF PYROTECHNICS:				
WILL THE EVENT REQUIRE ELECTRICAL HOOKUPS:	YES:	_ NO: _		
IF YES – NUMBER OF HOOKUPS				
WILL THE EVENT REQUIRE ACCESS TO WATER TAPS:	YES:	_ NO: _		
WILL THE EVENT COORDINATOR PROVIDE PORTABLE TOILETS (FOR THE GEN	IERAL P	UBLIC IN	ATTENDANCE
	NO: _			
IF YES – NUMBER OF UNITS LOCATION OF	UNITS			
WILL ADMISSION FEES BE CHARGED FOR ATTENDANCE	YI	ES:	_ NO:	
WILL FEES BE CHARGED FOR VENDORS AT THE EVENT	YI	ES:	_ NO:	
WILL SIGNS OR BANNERS BE DISPLAYED AS PART OF THE EVEN	IT YI	ES:	_ NO: _	
ADDITIONAL QUESTIONS				
HOW AND WHERE WILL PARKING FOR ATTENDEES BE PROVIDE	ED			

Note: Parking and buildings involved may be inspected by Town of Forest City Code Enforcement for compliance with ADA regulations.

VI.



HOW WILL TRASH BE CONTAINED AND REMOVED DURING AND AFTER EVENT
HOW WILL EVENT VOLUNTEER STAFF BE IDENTIFIED AS "EVENT STAFF"
HOW WILL EVENT STAFF BE TRAINED FOR THEIR ROLE IN THE EVENT

VII. Special Information for Applicants

- DO NOT ANNOUNCE, ADVERTISE, OR PROMOTE YOUR EVENT UNITL YOU HAVE AN APPROVED AND SIGNED PERMIT
- YOU WILL BE REQUIRED TO NOTIFY PROPERTY OWNERS AFFECTED BY THE EVENT AT THE TIME A
 SPECIAL EVENT PERMIT IS ISSUED WITH A COPY OF ANY CORRESPONDENCE PROVIDED TO THE
 TOWN OF FOREST CITY
- NO PERMANENT ALTERATIONS MAY BE MADE TO ANY PROPERTY OWNED BY THE TOWN OF FOREST CITY. THIS INCLUDES BUILDINGS, STREETS, OR FIXTURES.
- THE APPLICANT SHALL BE RESPONSIBLE FOR HIRING AND PAYING OFF DUTY -LAW ENFORCEMENT
 OFFICERS OR FOREST CITY FIRE PERSONNEL OR REIMBURSING THE TOWN OF FOREST CITY THE COST
 OF PROVIDING SUCH SERVICES WITH ON-DUTY PERSONNEL, TO APPROPRIATELY PROVIDE PUBLIC
 SAFETY NEEDS.
- FOR FESTIVALS OR EVENTS, THE APPLICANT SHALL BE RESPONSIBLE FOR HIRING OR REIMBURSING THE TOWN OF FOREST CITY FOR PROVIDING CITY STAFF, INCLUDING BUT NOT LIMITED TO OFF-DUTY LAW ENFORCEMENT, EMERGENCY MEDICAL PERSONNEL, FIRE PERSONNEL, STREET DEPARTMENT PERSONNEL, OR PUBLIC WORKS STAFF.
- THE TOWN MANAGER, IN CONSULTATION WITH THE FOREST CITY POLICE DEPARTMENT AND THE
 FOREST CITY FIRE DEPARTMENT, SHALL DETERMINE THE NUMBER OF STAFF NEEDED TO
 APPROPRIATEY MONITOR STREET CLOSURES, INTERNAL SECURITY, FIRE SAFETY NEEDS, AND
 EMERGENCY MEDICAL TECHNICIANS NEEDED. ADDITIONALLY, WHEN THESE NEEDS SHALL
 COMMENCE AND END



- Town of Forest City Fee Schedule:
 - o Event Forest City Police Officer \$50.00 / hour
 - Event Forest City Fire Department (fire protection) \$80.00 / hour (personnel)
 - \$175.00 / Hour (Apparatus Fee)
 - o Event Forest City Fire Department (medical support) \$40.00 / hour
 - \$100.00 / Hour (Apparatus Fee)
 - Event Forest City Street Department Support \$40.00 / hour
- Rutherford County Traffic Control Beadie Hollifield 828-980-2125
 - o Fees to be set by Rutherford County Traffic / Crime Control
- REQUEST FOR WAIVER OF FEES ASSOCIATED WITH SPECIAL EVENT

Э	EVENT NAME:
Э	WAIVER OF FEES JUSTIFICATION:
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*Special Event Permits must be submitted at least 60 days prior to the event (30 days for neighborhood street closings)

RETURN TO:

 Forest City Police Department 187 S. Church Street
 Forest City, North Carolina, 28043

ATTN: Chris LeRoy – Chief of Police chrisleroy@townofforestcity.com

Chris Weeks - Assistant Chief of Police

chrisweeks@townofforestcity.com



Α.	**** FOR INTERNAL USE ONLY ****
	APPLICATION RECEIVED:
	RECEIVED BY:
	APPLICATION APPROVED DATE:
	APPROVED BY:
	TOWN OF FOREST CITY FEE WAIVER:
	APPROVED BY:
	DATE OF APPROVAL:
	APPLICATION DENIED:
	DENIED BY:
	REASON FOR DENIAL:
В.	TOTAL COST FOR POLICE:
	TOTAL COST FOR FIRE:
	TOTAL COST FOR STREET DEPT.:
	TOTAL COST FOR FACILITY: MCNAIR FIELD:
	POPS:
	FARMERS MARKET:
	TOTAL COST FOR EVENT