PARKS & RECREATION

Special Event Application and Permit

Today's Date: _________________________ Date of Event: ______________ to ______________
Time(s): __________ a.m. __________ p.m. to __________ a.m. __________ p.m.

Type of Event: ____________________________________________________________
Facility Requested for Event: ________________________________________________

Responsible Individual:
Name: ________________________________________________________________
Address: _______________________________ City: _____________ State: _____ Zip: __________
Home Phone: _____________ Business: _____________ Cell: _____________ Fax: __________
Company or Organization: ______________________________________________

Please answer the following questions as completely as possible. If “yes” give details. Use separate sheet if necessary.

Approximate number of people attending________________________________________

Will you be serving food or drinks? □Yes □No
Will there be amplified sound? □Yes □No
Will a tent(s) be used for this event? □Yes □No
Will there be inflatable play apparatus? □Yes □No
Will you need special lighting? □Yes □No
Will you need electricity? □Yes □No

Traffic and Parking expectations:
________________________________________________________________________________________

Spanish Fork City will review the request for a Special Event to ensure that your rights and the rights of others can be maintained. Upon review, there may be conditions of approval attached to this permit. You must comply with any and all conditions to conduct this event. Please allow ten business days for processing.

The undersigned acknowledges that the information in this application is true and correct and agrees to adhere to all rules, regulations, and policies established by Spanish Fork City. Applicant also understands that an Event Permit does not authorize any violation of the provisions of Spanish Fork City Code or any other code or law, rules, regulations or ordinances. The undersigned agrees to waive and release all rights and claims that might be had against Spanish Fork City, its employees, officers, boards or agents.

FOR OFFICE USE ONLY
All Spanish Fork City Departments that are affected will be consulted. Special Conditions or Concerns may be attached to the approved permit.

Admin____ Parks/Rec____ Public Safety____ Public Works____ City Attorney____ City Planner____ Finance____
Risk Management____ SFCN____

Approved By:___________________________________ Date:____________________
Denied By:___________________________________ Date:____________________
Comments:_____________________________________________________________________________________________
_______________________________________________________________________________________________________
_______________________________________________________________________________________________________

Signature of Applicant:___________________________________ Date:____________________
DEPOSIT Paid ________ Date Paid ________ FEE Paid ________ Date Paid ________