

Village of Fowlerville

213 S. Grand Avenue
Fowlerville, Michigan 48836
Phone (517) 223-3771 Fax (517) 223-7435
www.fowlerville.org



Permit # _____

COMMUNITY EVENT APPLICATION

***A new application must be submitted each year

EVENT:

EVENT NAME: _____

EVENT PURPOSE: _____

SPONSORING ORGANIZATION INFORMATION: (i.e. 4th Of July, Christmas in the Ville)

Name: _____

Non-profit For-Profit City Operated/Sponsored Co-Sponsored

Address: _____ City: _____ State: _____ Zip: _____

Mailing Address: _____ City: _____ State: _____ Zip: _____

Phone #: _____ Email: _____

Contact Name: _____ Title: _____

Phone #: _____ Email: _____

CONTACT PERSON ON DAY OF EVENT:

Name: _____ Title: _____

Address: _____ City: _____ State: _____ Zip: _____

Phone #: _____ Email: _____

TYPE OF EVENT: (Check One)

Block Party Festival/Fair Marathon/Race/Run Parade Wedding

Other (describe): _____

EVENT INFORMATION:

Event date(s): _____ To _____

Rain date(s): _____ To _____

Event location(s) (descript and attach a map): _____

Event Hours: From _____ To _____

Estimate date/time for set up: _____

Estimate date/time for clean up: _____

Describe set up and clean up procedures: _____

Estimated attendance: _____

Describe crowd control plans for this event: _____

Describe the Community Event's impact on adjacent commercial and residential property: _____

SIDEWALKS:

Will sidewalks be used: Yes No If yes, include a detailed map outlining the proposed sidewalk use.

Describe sidewalk use: _____

STREETS:

Request to close: Yes No If yes, include a detailed map including street closures and emergency vehicles access.

Describe street closures: _____

Street closed date/time: _____ Street re-open date/time: _____

If the proposed event is a parade, list the point of origin, path, termination point and the number of entries: _____

MUSIC:

Will music be provided/included during the event: Yes No *Music must conform to Village Ordinance*

Describe the type of music proposed: Live Amplification Recorded Loudspeakers

Proposed time music will begin: _____ Proposed time music will end: _____

Proposed location of live band/disc jockey/loudspeakers/equipment: _____

Describe noise control: _____

EVENT INFORMATION (continued):

Will the event require the use of any of the following municipal equipment: Yes No

Barricades Quantity: _____

Traffic cones Quantity: _____

Other (describe): _____

Will the following be constructed or located in the event area? *No stakes of any kind allowed on asphalt*

Booths Quantity: _____ Tables Quantity: _____

Tents Quantity: _____ Rides Quantity: _____

Awnings Quantity: _____ Portable Toilets Quantity: _____

Canopies Quantity: _____ Trash Receptacles Quantity: _____

Other (describe): _____

You must attach a plan of the proposed layout. Include the proposed location of booths, tents, tables, rides, routes, portable toilets, trash receptacles etc.

Will the event have kiddie rides, inflatable, (i.e., moonwalk), amusement rides, climbing walls, live animals? *(If yes, additional insurance coverage will be required)* Yes No

If yes, describe in detail the types of attractions proposed: _____

EVENT INFORMATION (continued):

Will electric services be needed: Yes No If yes, describe in detail: _____

Will other utilities be needed: Yes No If yes, describe in detail: _____

Will other Village Facilities be needed: Yes No If yes, describe in detail: _____

FOOD SERVICES:

Will event have food, beverage, or concessions? Yes No If yes, please attach a copy of a valid Food License
Describe: _____

SIGNAGE:

Do you plan to have special event signs: Yes No ***Signs must conform to Village Ordinance.***
Describe signs proposed locations, etc.: _____

APPLICATION CHECKLIST (failure to provide necessary documentation will delay approval):

I have attached the following items:

- Completed Application
- Event Map (include detailed event layout and boundaries for all activities)
- Detailed Plan showing requested road closures, sidewalk uses, etc.
- Certificate of Insurance and Indemnification (due to Village offices 30 days prior to the first day of the event)
- Event Signage (description & location)
- Schedule of activities for the event
- Driver's License of Applicant

If document is missing, please explain: _____

The applicant and sponsoring organization understands and agrees to:

Provide a certificate of insurance with all coverages deemed necessary for the event, name the Village of Fowlerville as an additional insured on all applicable policies, and submit the certificate to the Village Office no later than thirty (30) days prior to the event.

Execute the attached Indemnification Agreement on the **Sponsoring Organizations Letterhead** and submit it to the Village Office at the time of application.

Comply with all Village ordinances, policies, and applicable State & Federal laws, and acknowledges that the Community Event permit does not relieve the applicant or sponsoring organization from meeting any application requirements of law or other public bodies or agencies. All sponsors are required to comply with the Americans with Disabilities Act when applicable. The ADA does not require the Village to take any action that would fundamentally alter the nature of its services, programs, activities, and facilities, or impose undue financial or administrative burden.

Promptly pay any billing for Village services with may be rendered or deemed necessary as part of the event and event approval.

Applicant and sponsoring organization further understands the approval of this community event may include additional requirements and/or limitations based on the Village review of this application, in accordance with the Village's Community Event Policy. The applicant and sponsoring organization understands that it may be necessary to meet with Village staff during the review of this application and the Village Council approval may be necessary. The applicant agrees the sponsoring organization will operate the event in conformance with the written approval.

Applicant understands that he/she (or sponsoring organization) is responsible for contacting the Livingston County Health Department to secure all permits required for this event.

As the duly authorized agent of the sponsoring organization, I hereby apply for approval of the Community Event and affirm the above understandings. The information provided on this application is true and complete to the best of my knowledge.

Applicant Signature

Date:

Complete this application and return it, along with all required documentation to the Village Office prior to the application deadline. Please note that a new application must be submitted each year.

Application Receipt Date:

Council Approval Date:

INDEMNIFICATION AGREEMENT

The _____ (event sponsor) agrees to defend, indemnify, and hold harmless the Village of Fowlerville, Michigan, from any claim, demand, suit, loss, cost of expense, or any damage which may be asserted, claimed, or recovered against or from the _____ (event name) by reason of any damage to property, personal injury or bodily injury, including death, sustained by any person whomsoever and which damage, injury or death arises out of or is incident to or in any way connected with the performance of this contract, and regardless of which claim, demand, damage, loss, cost of expense is caused in whole or in part by the negligence of the Village of Fowlerville or by third parties, or by the agents, servants, employees or factors of any of them.

Signature _____ Date _____

Printed Name _____ Title _____

Witness _____ Date _____

Printed Name _____