



If yes, you may reserve a date for next year with this application. To reserve dates for next year, please provide the following information: \_\_\_\_\_

Normal event schedule (e.g., third weekend in July): \_\_\_\_\_

Next year's specific dates: \_\_\_\_\_

7. An Event Map must be attached. If your event will use streets and/or sidewalks or will use multiple locations, please attach a complete map showing assembly and dispersal locations and the route plan. Also show streets or parking lots that you are requesting to be blocked off.
8. Vendors: Food/Beverage Concessions?  Yes  No  
Other Vendors?  Yes  No  
If yes, refer to the Rules and Regulations for requirements.
9. Event Signs: Will this event include the use of signs?  Yes  No  
If yes, refer to the Rules and Regulations for requirements.
10. Parking: Are you requesting to charge for parking?  Yes  No  
If Yes, list the lots or locations where this parking is requested.
11. Alcoholic Beverages: Will alcoholic beverages be served?  Yes  No  
Who holds the Liquor Control Commission License? (Copy must be provided)  
\_\_\_\_\_
12. Other Requests: \_\_\_\_\_
13. Noise Ordinance: Request to be Waived?  Yes  No
14. Location: Permission has been granted by owner?  Yes  No
15. Certification and Signature: I understand and agree on behalf of the sponsoring organization that:
- a. A certificate of insurance must be provided which names the City of Eaton Rapids as an additional named insured party on the policy. (See the Rules and Regulations for insurance requirements)
  - b. Event sponsors and participants will be required to sign Indemnification Agreement forms.
  - c. If the event includes solicitation by workers standing in parking lots, the required safety requirements and use of traffic cones will be maintained at all times in accordance with the City's general policies and practices. The City does not allow standing in the street or making any solicitations from the street.
  - d. All food vendors must be approved by the Eaton County Health Department, and each food and/or other vendor must provide the City with a certificate of insurance in an amount approved by the City which names the City as an additional insured party on the policy.
  - e. The approval of this Special Event Permit may include additional requirements and/or limitations, based on the City's review of this application. The event will be operated in conformance within the Written Confirmation of Approval.

- f. The Sponsoring Organization will provide a security deposit for the estimated fees as may be required by the City and will promptly pay any billing for City Services which may be rendered.
- g. INDEMNIFICATION: I agree and bind my organization to hold the City of Eaton Rapids harmless from any claim for damage or injury arising out of our activities in connection with this event. I understand that this agreement to indemnify is for any and all liability of the City of Eaton Rapids, including costs of defense and attorney fees arising from any activity on our part which is legally negligent, reckless or a violation of a legal duty owed by us to the City of Eaton Rapids or any third person.

As an authorized agent of the sponsoring organization, I hereby apply for approval of this Special Event, affirm the above understandings, and agree that my sponsoring organization will comply with City's Special Events Review Committee, the terms of the Written Confirmation of Approval, and all other City requirements, ordinances and other laws which may apply to this Special Event.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Sponsoring Organization's Agent

\_\_\_\_\_  
Please Print Sponsoring Organization's Agent

Return this form to:

City of Eaton Rapids  
200 S. Main St.  
Eaton Rapids, MI 48827  
PH: 517-663-8118  
FX: 517-663-1116

Date Deposit Paid \_\_\_\_\_ CER Account #208-253-694.00

Date Rec'd by City of Eaton Rapids \_\_\_\_\_

Date Approved by City of Eaton Rapids \_\_\_\_\_