

City of Sikeston Carnival & Circus Permit Application Ordinance No. 4047

Date: _____
 Sponsor (if any) _____ Telephone: _____
 Address: _____
 Operator _____
 Name: _____ Telephone: _____
 Business Address _____

Location of the proposed circus or carnival in Sikeston: _____
 Local Telephone: _____

Date and Hours of Operation

Beginning Date: _____ Closing Date: _____

Hours of Operation: _____

Please list the rides to be operated, the admission fee to be charged for each ride, and the year manufactured of the ride.

<u>Ride</u>	<u>Fee</u>	<u>Year</u>

(If additional space is needed to list the rides, please attach the list to the application).

Please attach a certificate of insurance showing the City of Sikeston as a named insured covering any damage or liability to the City, which may be caused by the operation of the amusement.

Bodily Injury	\$300,000 Each Occurrence \$100,000 Each Person
Property Damage	\$ 50,000 Each Occurrence \$100,000 Aggregate

The operator and/or sponsor agrees to the following:

1. To purchase an occupational license at a cost of \$100.00 per week.
2. Hours of operation will be limited to 9:00 a.m. to 12:00 midnight Monday through Friday and 9:00 a.m. to 1:30 a.m. on Saturday, Sunday and holidays.
3. Adequate restroom facilities will be provided on the premises of the carnival or circus. Such facilities may be of a temporary nature.
4. Adequate facilities for the disposal of trash and debris will be provided on the premises.
5. The Department of Public Work's inspectors and Director of Public Works must approve all electrical, wiring and structures prior to issuance of the occupational license and operation.
6. The Public Safety Director will inspect the premises prior to operation to determine compliance with all other City ordinances, i.e. gambling, fire, health, traffic and parking.
7. The area will be cleaned up after the completion of the daily amusement activities and that all trash and debris must be removed from the property.

The operator understands and hereby agrees to comply with the provisions of the City of Sikeston Carnival and Circus Ordinance, and the occupational license may be revoked by the City Manager for failure to comply with the provision of the ordinance.

Signature

Title of Operator

Signature and Title of Sponsor (if any)

For City Use Only

City Collector

Payment of License fee:
Date: _____

License Number: _____
Amount: _____

Time: _____

Date Issued: _____

Public Works Department

Electrical/Building Inspector: _____

Signature: _____

Approved: _____

Disapproved: _____

Comments: _____

Humane Officer: _____

Signature: _____

Approved: _____

Disapproved: _____

Comments: _____

Director of Public Works: _____

Signature: _____

Approved: _____

Disapproved: _____

Comments: _____

Public Safety Department Inspector: _____

Signature: _____

Title: _____

Approved: _____

Disapproved: _____

Comments: _____

County Health Department Inspector: _____

Signature: _____

Approved: _____

Disapproved: _____

Comments: _____