

OUTSIDE EVENT PERMIT

Date of Event: _____ Organization/Type of Event: _____

Applicant's Name: _____ Date of Birth: _____

Applicant's Address: _____

Applicant's Phone Number: _____

Onsite Contact Person: _____ Phone Number: _____

Location of Event: _____ Fee/Cover Charge: Yes No

Street Closure Needed? Yes No If yes, where: _____

****If street closure is needed, applicant must submit temporary Use of Public Right-of-Way Permit Application****

Music: Yes No If Yes: Sound System Band

Will Alcohol be Served, Sold or Possessed? Yes No Number of People Attending: _____

Duration (time of event/music): _____ A.M. P.M. TO _____ A.M. P.M.

****By signing below, I certify that the information provided in this application is true and correct****

Signature of Applicant: _____ Date: _____

Property Owner of Event Location: _____

Signature of Property Owner: _____

** Attach a detailed description of the event and any flyers/invitations associated with the event and permission from the property owner (if different than applicant) Ordinance #5371 adopted 3/26/01. (Permit revised 5/6/09; 1/10/14; 2/22/18; 10/26/18; 10/7/19)

Office Use:

Business License: _____ Yes _____ No _____ N/A Checked By: _____

Zoning of Property: _____ Zoning Checked By: _____

Temporary Use of Public Right-of-Way Permit: Approved Denied N/A

Department of Public Works (if applicable) _____ N/A

Liquor License Checked By (if applicable): _____ Approved Denied N/A

DPS Check for Warrants, Noise Citations, Etc.: _____

DPS Checked By: _____ Approved Denied

DPS Approved, as amended (if applicable) _____

City Manager Signature: _____

Permit: Approved Denied Date: _____

cc: Director of Public Safety • Administration • Police Captain • Dispatch • Fire Captain • Public Works • Parks