



Special Event Permit Application
 PO Box 190 Albemarle, NC 28001-0190
www.albemarlenc.gov

SECTION I: GENERAL INFORMATION

Title of Event:		
Event Website (if applicable):	Event Date/s:	Event Hours:

**USE ADDITIONAL ATTACHMENTS
 FOR ANY PORTIONS OF APPLICATION AS NEEDED**

Event Category: (please check all that apply) <input type="checkbox"/> Assembly <input type="checkbox"/> Festival/Outdoor Market <input type="checkbox"/> Run/Walk <input type="checkbox"/> Parade <input type="checkbox"/> Demonstration <input type="checkbox"/> Concert/Performance <input type="checkbox"/> Block Party <input type="checkbox"/> Roadside Solicitation <input type="checkbox"/> Educational <input type="checkbox"/> Other: _____	Special Considerations: (please check all that apply) <input type="checkbox"/> Alcoholic Beverages <input type="checkbox"/> Food Sales <input type="checkbox"/> Cooking <input type="checkbox"/> Merchandise Sales <input type="checkbox"/> Pets/Animals <input type="checkbox"/> Use of Electricity <input type="checkbox"/> Sound Amplification <input type="checkbox"/> Tents <input type="checkbox"/> Fireworks/Pyrotechnics <input type="checkbox"/> Portable Restrooms <input type="checkbox"/> Other: _____
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Time Set up Begins:	Time Break Down Ends:
Estimated Event Attendance:	Estimated # of People at Peak Periods:
Estimated # of Vehicles:	Estimated Vehicles at Peak Periods:

SECTION II: EVENT ORGANIZATION INFORMATION

Host Organization:	Applicant Name:		
Address:	City:	State:	Zip:
Phone#:	Mobile#:	Email:	
Primary On-Site Contact:		Mobile#:	
Other On-Site Contact Info:		Org. EIN#:	

SECTION III: EVENT DETAILS

Description of the Event: _____ _____ _____	
Location/s of the Event:	Site Capacity:
Property Address:	
Property Owner/s:	Owner/s Authorized Use:

SECTION IV: INSURANCE REQUIREMENTS

(COMPLETE ONLY IF STREET CLOSURE, FIREWORKS, OR ALCOHOL BEING REQUESTED)

Name of Policy Holder:	Policy#:
Policy Amount:	Policy Type:

**A COPY OF POLICY MUST BE PROVIDED WITH THE APPLICATION.
 CITY OF ALBEMARLE MUST BE LISTED AS "ADDITIONAL INSURED" PARTY.**

SECTION V: PERMIT FEES

<input type="checkbox"/> Tent Permit (\$50)	<input type="checkbox"/> Public Assembly (\$25)	<input type="checkbox"/> Special Event Permit (\$25)
<input type="checkbox"/> Street Closing (\$50)	<input type="checkbox"/> Fireworks/Pyrotechnics (\$100 for one time event/\$300 for 6 months)	
Civic Groups or 501c organizations may be fee exempt at discretion of City Council, if requested. Proof of federal 501c Status must be submitted with Application. Check here for fee waiver request <input type="checkbox"/>		



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SECTION VI: SPECIAL CONSIDERATION DETAIL

(CHECK EACH BOX AS APPLICABLE AND PROVIDE DETAIL REQUESTED)

Street Closures (map of proposed closing and route must be provided with application)
NOTE: ALL NCDOT ROADS MUST BE APPROVED BY NCDOT
Reason for Street Closure: _____
Name of Street to be closed: _____ from _____ to _____
Additional Street: _____ from _____ to _____
of Barricades needed: _____ # of cones needed _____ Dropoff location: _____
Date of Closure: _____ Start Time: _____ to _____
Additional Comments: _____

Trash/Debris Plan: _____

Alcoholic Beverages* (check all that apply)

- Free/Host Alcohol
- Alcohol Sales (ABC Permit must accompany)
- Host and Sale Alcohol
- Beer
- Wine
- Beer and Wine
- Liquor

Describe Security Plan to ensure safe sale and distribution of alcohol at your event: _____

Appropriate ABC Permits must accompany application. Failure to submit at time of application will affect approval.

* Applicant must provide a map of proposed designated area with this application. Right to modify area is reserved by the City.

Parade/Run/Walk/Procession/Demonstration (map of route required)

- Open Sidewalks only
- Streets w/ temporary traffic interruptions
- Street Closures
- Sidewalk Closures

Start Time: _____ End Time: _____
Purpose: _____

Additional Permit Attachments Included:

- Site Map of All Activities
- Parking Plan
- Emergency Action Plan with site map (required for any downtown event)
- Security Plan
- General Liability Insurance
- ABC Permit
- Alcohol Beverage Designated Area Map
- Proof of 501C Status
- Application Fee
- Property Owner Authorization
- Business Notification Form

Tents (Width x Length x Height)
Dimensions of Tent: _____
Tents greater than 400 square feet require an additional \$50 permit fee
TENT PERMIT ONLY DOES NOT REQUIRE ADDITIONAL SPECIAL EVENT FEE

Cooking or Warming Food? (Circle One)
Method of Heat _____

I certify that the information contained in the foregoing application is true and correct to the best of my knowledge and belief that I have read, understand, and agree to abide by the rules and regulations governing the proposed Special Event under the City of Albemarle Municipal Code and I understand that this application is made subject to the rules and regulations established by the City Council and/or City Manager or City Manager's designee. Applicant agrees to comply with all other requirements by the City, County, State, and Federal Government, and any other applicable entity which may pertain to the use of the Event venue and the conduct of the Event. In the event that a possessory interest subject to taxation is created by virtue of this use-permit, I agree to pay all possessory interest taxes and the City shall not be liable for the payment of such taxes. I further agree that the payment of any such taxes shall reduce and consideration paid to the City pursuant to this use-permit. I agree to abide by these rules, and further certify that I, on behalf of the host organization, am also authorized to commit that organization, and therefore agree to be financially responsible for any costs and fees that may be incurred by or on behalf of the Event to the City of Albemarle. I also understand the application fee is non-refundable and due at the time of application submittal. The submission of this application is not an automatic approval or guarantee.

Print Name of Application/Host Organization: _____ Title: _____

Signature _____ **Submission Date:** _____