

## **Application for Special Event Permit**

P.O. Box 156, 15 North Church Street, Eureka, Utah 84628 Phone (435) 433-6915 Fax (435) 433-6891 www.eurekautah.org

An application must be completed and submitted no less than 30 days in advance of the special event. Failure to submit a complete application and/or submission of that application outside of the required submission time frame may delay approval. Application submission does not guarantee approval. A Special Event Permit may be revoked upon failure to comply with conditions to the original approval of the permit.

SUBMITTAL REQUIRMENTS:

If the event will take place in any	city facility or park, th	ne event needs to be sch	eduled with the
Eureka City Office.			
City Park Pavilion Reserv	ation		e includes Restrooms
Completed and signed Special Ev	ent Application Form.		
Attach Site Plan of the event and	Map of Proposed Rout	te (if applicable).	
Attach Proof of Insurance (certifi	icate must list Eureka	City as an additional insi	ared).
Attach Proof of Non-Profit Status	s (For Non-Profit or Ch	aritable Organizations)	
All other applicable items reques	sted on Special Event A	application.	
Pay Special Event Fee of \$100.00			
Pay Deposit (refundable) of \$500	0.00		
APPLICATION INFORMATION:			
Applicant Name:			
Street Name:			
Mailing Address:	City:	State	Zip
(If different from above)			
Phone:	Email:		
EVENT INFORMATION:			
Name of event:			
Type of event:			
Sponsor(s) of Event (if any):			

Location of Event:				
Date of event:	Event hours:(Start)	(	End)	
Estimated Attendance:	Estimated Sta	aff on Hand for	Event:	
Yes □ No □	sed, has a reservation been e map of proposed route if a		uled time o	of event?
EVENT PARKING: (must	be included on site plan)			
Will Off-street parking at (if no, additional parking ma	location be sufficient for thay need to be arranged)	e event?	Yes □	No 🗆
Will event parking be on (if yes, written permission f	area is required)	Yes □	No □	
Will there be transportat	ion services to and from the	parking lots?	Yes □	No □
Description of reason for	closure:			
Time of closure:(Start Ti	ne)	(End	Time)	
AMPLIFIED SOUND:				
Will amplified sound be u	used for the event? must be approved by the Mayo	Yes □ or and Council)	No □	
RESTROOM FACILITIES	:			
Will portable restroom fa (2 chemical toilets for every		Yes □	No □	

## **FOOD AND VENDOR BOOTHS:** (must be included on site plan)

A business license is required to sell, expose for sale, or offer for sale any goods, wares, or

merchandise in Eureka City. The event collicense prior to the event and provide a T			5
Will the event have vendor booths?	Yes □	No □	If yes, how many?
Will the event have food booths?	Yes □	No □	If yes, how many?
TRASH DISPOSAL:			
What measures will be taken to clean up	after the event	?	
INSURANCE:			
Insurance must be submitted at least 10 liability insurance in the minimum amou shall name Eureka City, 15 North Church	nt of one millio	on dollars	(\$1,000,000) and the applicant
NON-PROFIT or CHARITABLE ORGANI	ZATIONS:		
All Non-Profit or Charitable Organization a regular Council Meeting and submitting			
AGREEMENT AND SIGNATURE:			
I, the undersigned representative have reapplication. I agree to follow the guidelin herein, including supporting documentations.	es and necessa	ıry conditi	ons. The information contained
Applicant name (printed):			Date:
Applicant signature:			
City approval granted for the special ever	FOR CITY US		tions: Yes□ No □
Conditions:			
City Recorder		N	