

SPECIAL EVENT PERMIT FORM

Name of Person requesting permit: _____

Type of Event: _____

Brief Description of Event: _____

Date of Request: _____

Location of Event: _____

Date(s) of Event: _____

Time of Event: _____ to _____

Will admission be charged? Yes No

Will outdoor music be played? Yes No

Will alcoholic beverages be sold or consumed on premises? Yes No

Will security be provided? Yes No

_____ Official Use Only _____

City Office	Permit Required		Permit Obtained		Signature of Official Issuing or Denying Permit	Date
	YES	NO	YES	NO		
Mayor						
Collector						
Zoning						
Inspection						
Fire Dept.						
Police Dept.						
Parks and Rec.						
ABC						