

CITY OF RICHMOND, MICHIGAN

Application for Special Event Activity

All applicants must complete the following:

Name of Organization: _____

Address: _____ Phone: _____

City/State/Zip: _____

Contact Person: _____ Phone: _____

Description of Activity: _____

Location(s) of Activity: _____

Date(s) of Activity: _____ Alternate Date: _____

Time period: _____

<input type="checkbox"/> Street Closing	<input type="checkbox"/> Liquor License	<input type="checkbox"/> Vendors
<input type="checkbox"/> Barricades/Traffic Cones	<input type="checkbox"/> Parking Spaces	<input type="checkbox"/> Water
<input type="checkbox"/> Police/Security	<input type="checkbox"/> Electricity	
<input type="checkbox"/> Park Use	<input type="checkbox"/> Portable Restrooms	
<input type="checkbox"/> Traffic Control		
<input type="checkbox"/> Other _____		

- Note:
- 1) A permit, if issued, must be displayed
 - 2) The permit is subject to revocation for cause
 - 3) If food or beverages are to be sold, evidence of Health Department approval must be furnished
 - 4) Evidence of Public Liability Insurance is required as determined by City Council

FOR CITY USE ONLY

Barricades/Traffic Cones _____ Permit/License _____

Police/Security _____ Insurance _____

Other _____

Copies sent to: Approval received:

<input type="checkbox"/> Police Dept.	<input type="checkbox"/> DPW Dept.	<input type="checkbox"/> MDOT
<input type="checkbox"/> Fire Dept.	<input type="checkbox"/> Rec. Dept.	<input type="checkbox"/> Building Dept.
<input type="checkbox"/> City Clerk		

Referred to City Council on _____ and approved on _____. Approval subject to the following restrictions: _____

PLEASE RETURN COMPLETED FORM TO THE CITY CLERK