STRASBURG BOROUGH SPECIAL PUBLIC EVENTS PERMIT APPLICATION

Approval of Special Events in the Borough of Strasburg is required before plans are finalized and publicity is released. Please submit this form at least thirty (30) days prior to the event.

All permitted special events that are open to the public will be posted on the Police Department's website as public information. If you do not want your or your organization's contact names, telephone numbers, or e-mail addresses to be made public in this way, please indicate by checking the box below. ☐ Please DO NOT publicize contact information for this event. Applicant/Organization Contact Person Contact Address (Home) _____(Business) ____ Telephone E-mail Address Name/Purpose of Event Detailed Description of Event Location of Event Alternate Location (if inclement weather) Day of Week _____ Date ____ Start Time _____ End Time _____ Alternate _____ Does the event require closing streets? Yes _____ No ____ If yes, which street(s)?

(Form continued on other side)

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copy of your Certificate	inization are required to have of Insurance ["ACORD" cert	ificate] listing th	e Borough of Strasburg as
form.	Contact your insurance agent	or provider for a	assistance in obtaining tins
	Yes No Expected	d attendance?	
3. Does your organization	have persons to park vehicles?	? Yes No	
	have comfort stations for the p		
	made arrangements for Fire Co	_	
of all literature.	be distributing literature? Yes		
	blic address system or amplifie	d music? Yes	No If yes,
•	ns on start time and end times.	If was all DA I	Domonton ant of A aniquitums
regulations must be co	be served? Yes No	_ II yes, ali PA I	Department of Agriculture
	? Yes No If yes,	liability insurance	ee <u>must</u> include host liquor
<u> </u>	notified the neighbors of the e	vent? Yes	No
	must be removed at the close of		
Any additional costs incur sponsoring organization.	red by the Borough of Strasbur	g to provide serv	ices will be billed to the
Date		Signature of A	applicant
Borough staff to calculat	e fees:		
ACTIVITY FEE:		¢	
	EE hours @ \$ per hou	φ ır	
ROAD CLOSING FEE	μΣ nours @ ψ per nou	\$ \$ \$	
	TAL		\$
*****	*******	* * * * * * * * * *	******
A managed Day	This section for BOROUC	GH USE ONLY	
Approved By:			
Date	Name		Title
Accord Liability Insurance	e Certificate		
Additional Conditions - N	Yes if yes, see	below	