

CITY OF ATHENS ALABAMA

APPLICATION FOR PERMIT FOR PARADE, PROCESSION OR PUBLIC DEMONSTRATION ALL APPLICATIONS MUST BE SUBMITTED AND APPROVED PRIOR TO YOUR EVENT

For Official Use Only		
Received By: _____	Date: _____	Time: _____

Application Date: _____

Name of Organization: _____ Non-Profit: Yes _____ No _____

Address of Organization: _____

Primary Organizer: _____ Organizer's Date of Birth: _____

Organizer's Address: _____

Organizer's Phone: _____ Email: _____

Name of the Event: _____

Event Website Address: _____

Event Category: **(** Map Required)**

- | | | | |
|----------------------|------------------------|----------------------|------------------|
| _____ Assembly/Rally | _____ Concert | _____ Parade** | _____ Race/Run** |
| _____ Block Party** | _____ Festival | _____ Performance | _____ Other |
| _____ Car Show | _____ Film/Photography | _____ Protest/Picket | |

If "Other", describe: _____

Event Location: **(Assembly point, route of parade/procession, disassembly point, all other pertinent information)**

Permission to use event location was obtained from? **(Name/phone number required)** _____

Date(s) of the event: _____ Event operating hours: _____

Set-up date(s): _____ Set-up time(s): _____

Tear down date(s): _____ Tear down time(s): _____

Estimated attendance total each day: _____ Estimated number of vehicles involved in this event: _____

Describe the Event: _____

Primary on-site Contact: _____ Cell Phone: _____

Secondary on-site Contact: _____ Cell Phone: _____

Public Works (256-233-8747)

Will street(s) be closed? Yes _____ No _____ Will sidewalk(s) be closed? Yes _____ No _____

Will parking places need to be blocked? Yes _____ No _____

If "Yes", Explain: _____

Will the event have handicap parking? Yes _____ No _____

Will the event require use of the City of Athens owned barricades? Yes _____ No _____

Will any tents or canopies be used at the event? Yes _____ No _____

*****If "Yes", include location(s) on map**

If "Yes", How many? _____ List of tent size(s): _____

Name of company, phone number and address providing tents or canopies: _____

Will the tent(s) be open or closed? Open _____ Closed _____

How will the tent(s) be secured to the ground? _____

Have you or the company providing the tent(s) contacted the City of Athens Street Department? Yes _____ No _____

Have you or the company providing the tent contacted 811 for underground locates? Yes _____ No _____

If "Yes", when was 811 contacted? _____

Will waste receptacles be needed? Yes _____ No _____

If "Yes", describe: _____

Will recyclable receptacles be needed? Yes _____ No _____

If "Yes", describe: _____

Have you contacted the City of Athens Sanitation Department? Yes _____ No _____

If "Yes", name and phone number of responsible contact for Sanitation Department: _____

Will portable restrooms be required? Yes _____ No _____

If "Yes", How many: _____ Installation Date: _____ Removal Date: _____

Name of company providing portable restroom(s): _____

Location of portable restroom(s): _____

Will the event require any type of stage or platform? Yes _____ No _____

If "Yes", describe: (**Type Structure, Size, Location**) _____

Company providing stage or platform, phone number and address: _____

Utilities (256-232-1440)

Does your event require electricity? Yes _____ No _____

If "Yes", describe: (**Generator, Existing Power**) _____

Have you contacted Athens Utilities? Yes _____ No _____

If "Yes", name and phone number of responsible contact for Athens Utilities: _____

Fire Department (256-262-1390)

Do you plan on having any open flames? Yes _____ No _____

Will fireworks/pyrotechnics be part of your event? Yes _____ No _____

List the name of company phone number and address providing fireworks/pyrotechnics: _____

Will your event have any grills? Yes _____ No _____

Will your event have heaters of any kind? Yes _____ No _____

Have you contacted the Athens Fire Department? Yes _____ No _____

If "Yes", name and phone number of responsible contact for Athens Fire Department: _____

Parks and Recreation Department (256-233-8743)

Will a City of Athens Park and Recreation Department facility be utilized? Yes _____ No _____

If "Yes", which facility will be utilized: _____

Have you obtained permission from the City of Athens Parks and Recreation Department? Yes _____ No _____

City Clerk (Taxes and Licenses - 256-233-8720)

*****Applicants must provide a list of all vendors, merchants, food trucks, musicians, etc. that plan to participate in the event to the City Clerk's Office no later than one week prior to the date of the event. The City Clerk's Office will ensure that all those participating in the event are properly licensed to do so within city limits. This list can be emailed to licensing@athensal.us**

Will food or drink be sold at the event? Yes _____ No _____

If "Yes" please describe: *(List who will be supplying the food and drink.)* _____

Will food trucks be part of this event? Yes _____ No _____

Have you contacted the Limestone County Health Department? Yes _____ No _____

Will the event include vendors? *(Arts, crafts, clothing or other items)* Yes _____ No _____

If "Yes", describe: _____

Will alcohol be sold, traded, dispensed or consumed at this event? Yes _____ No _____

If "Yes" describe: _____

If "Yes", have you obtained the appropriate licensing prescribed by law? Yes _____ No _____

Have you contacted the City Clerk's office? Yes _____ No _____

If "Yes", name and phone number of responsible contact for City Clerk's Office: _____

General

Is the event covered by liability insurance? Yes _____ No _____

*****If "Yes", please attach a copy of the insurance policy**

Will admission be charged to attend the event? Yes _____ No _____

List the ultimate use of net proceeds from the special event and whether any event proceeds will benefit any person, organizing, holding or promoting the event. _____

What are your provisions for cleaning up after the event? _____

Does your event include any additional lighting or lasers?

Yes _____ No _____

If "Yes", describe: _____

List the name of company phone number and address providing additional lighting or lasers: _____

Will there be advertisements including signs or banners for the event?

Yes _____ No _____

Are animals part of the event?

Yes _____ No _____

If "Yes", how many and what kind? _____

Will your event include any amplified music/speaking or other excessive noise?

Yes _____ No _____

If "Yes", describe: *(include times this equipment will be used)* _____

What are your provisions, if any, for security, traffic control and/or crowd control? _____

Are there any other special circumstances which are pertinent to this application? _____

I understand that filing an application for a parade, procession or other public demonstration is not a guarantee that my request will be approved. I certify that all of the information contained in this application is true and correct to the best of my knowledge. I understand the permit, if granted, is not transferable and is revocable at any time by the City of Athens.

If your application is approved your permit will be emailed to you at the email you provide on page 1.

Name of Applicant _____

Signature _____ Date _____