

APPLICATION FOR SPECIAL EVENTS

ORDINANCE #162-11/CHAPTER 27

(APPLICATION MUST BE SUBMITTED NOT LATER THAN 45 DAYS PRIOR TO EVENT, ETC.)

**APPLICANT -
NAME** _____

ADDRESS _____

TELEPHONE # _____ **EMAIL:** _____

Person/Corporation/Association Sponsoring Activity

NAME _____ **TELEPHONE** _____

ADDRESS _____

REASON FOR SPECIAL EVENT _____

DATE(S) AND TIME(S) OF EVENT _____

LOCATION OF EVENT _____

WILL TICKETS BE SOLD TO THE EVENT _____

PROCEEDS TO BE USED FOR _____

ANTICIPATED NUMBER OF PEOPLE _____

DETAILED DESCRIPTION OF EVENT (Type, structures, tents, fences, barricades, signs, banners, rest room facilities, Attach Sketch/Footprint to include route to be used, etc.

DETAILS REGARDING SECURITY/TRAFFIC CONTROL _____

(OVER)

DETAILED DESCRIPTION OF BOROUGH RESOURCES/SERVICES REQUIRED

WILL THERE BE ANY VENDORS AT THE EVENT? _____
How Many _____ **Type of Vendor** _____

(All vendors must hold a Vendor's Permit as well as a food handler's permit issued by the Borough of Sayreville, if applicable.)

ARE YOU A BONAFIDE NON PROFIT ORGANIZATION (Attach IRS forms)

WILL ALCOHOLIC BEVERAGES BE SERVED _____ **YES** _____ **NO**
DO YOU HAVE A PERMIT OR LICENSE TO DISPENSE/SELL ALCOHOL
_____ **YES** _____ **NO**

Signature

FOR OFFICE USE ONLY:

Sent Applications for Approval: _____

REC DIRECTOR _____ **DPW** _____ **FIRE DEPT/OFFICIAL** _____

POLICE DEPT. _____ **CONSTRUCTION** _____

EMERGENCY MEDICAL SERVICES _____

Meeting Date: _____ **2nd Meeting Date:** _____

LICENSE NUMBER: _____

DATE MAILED: _____

INSURANCE REQUIRED - YES _____ **NO** _____
IF YES, DATE POSTED & APPROVED _____