



APPLICATION FOR SPECIAL EVENT PERMIT

Event Name: \_\_\_\_\_

Event Start Date: \_\_\_\_\_ Event End Date: \_\_\_\_\_

Event Location: \_\_\_\_\_

Event Hours: \_\_\_\_\_

Event Description & Activities: \_\_\_\_\_

APPLICANT INFORMATION:

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone #: \_\_\_\_\_ Cell #: \_\_\_\_\_

Fax #: \_\_\_\_\_ Email: \_\_\_\_\_

PRIMARY CONTACT INFORMATION FOR THE EVENT (If not the applicant)

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone #: \_\_\_\_\_ Cell #: \_\_\_\_\_

Fax #: \_\_\_\_\_ Email: \_\_\_\_\_

ADDITIONAL EVENT PARTNER OR SPONSOR INFORMATION (use additional sheets if needed)

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone #: \_\_\_\_\_ Cell #: \_\_\_\_\_

Fax #: \_\_\_\_\_ Email: \_\_\_\_\_

Event Category: Community Festival  Concert  Circus  Bike Race/Tour   
(check all that apply) Athletic Event  Run/Walk  Parade  Carnival/Fair

Event Admission/Entry Fee: In Advance: \_\_\_\_\_ Day of: \_\_\_\_\_

Overall Attendance Estimate: \_\_\_\_\_ Largest One-time Attendance Estimate: \_\_\_\_\_

Does the event involve the sale and/or consumption of food? Yes  No

\_\_\_\_\_ # of vendors \_\_\_\_\_ # of vendors needing water \_\_\_\_\_ # of vendors needing electricity

Cooking Method(s) Charcoal  Gas/Propane  Electric  Other  \_\_\_\_\_

Does the event involve the sale and/or consumption of alcohol? Yes  No

If yes, please contact the Texas Alcohol Beverage Commission for a temporary alcohol permit.

Does the event involve any entertainment? Yes  No

If yes, please describe the entertainment. \_\_\_\_\_

Event Venue Set-Up Date: \_\_\_\_\_ Set-Up Start Time: \_\_\_\_\_ Set-Up Finish Time: \_\_\_\_\_

Event Venue Break-down Date: \_\_\_\_\_ Break-down Start Time: \_\_\_\_\_ Break-down Finish Time: \_\_\_\_\_

Requested City Street(s) Closure: \_\_\_\_\_

Proposed Date and Time of City Street(s) Closure: \_\_\_\_\_

**EVENT EQUIPMENT/ELEMENTS YOU WILL BE PROVIDING:**

(Check/Complete all that apply)

Dumpsters: Yes  No  Quantity: \_\_\_\_\_

Portable Toilets: Yes  No  Quantity: \_\_\_\_\_

Trash Cans: Yes  No  Quantity: \_\_\_\_\_

Recycling Containers: Yes  No  Quantity: \_\_\_\_\_

Banners or Signs: Yes  No  Quantity: \_\_\_\_\_

Fencing / Barricades: Yes  No  Quantity: \_\_\_\_\_

Special Lighting: Yes  No  Describe: \_\_\_\_\_

Site Decorations: Yes  No  Describe: \_\_\_\_\_

Security: Yes  No  Quantity: \_\_\_\_\_ Describe: \_\_\_\_\_

Traffic Control: Yes  No  Describe: \_\_\_\_\_

Stage/Bleachers/Other: Yes  No  Quantity: \_\_\_\_\_ Describe: \_\_\_\_\_

Event Website or Phone #: Yes  No  URL or Phone # : \_\_\_\_\_

Fireworks/Fires/Pyrotechnics: Yes  No  Describe: \_\_\_\_\_

Fireworks Contractor: \_\_\_\_\_ Phone #: \_\_\_\_\_

Booths/Exhibits/Displays: Yes  No  Quantity: \_\_\_\_\_ Describe: \_\_\_\_\_

Tents or canopies: Yes  No  Quantity: \_\_\_\_\_ Size/Sq. Feet: \_\_\_\_\_

Vehicles/Trailers: Yes  No  Quantity: \_\_\_\_\_ Describe: \_\_\_\_\_

Animals: Yes  No  Quantity: \_\_\_\_\_ Describe: \_\_\_\_\_

VIP Area: Yes  No  Describe: \_\_\_\_\_

Amplified Music/Sound: Yes  No  Describe: \_\_\_\_\_

Rides/Inflatables/Other Amusements Items: Yes  No  Quantity: \_\_\_\_\_ Describe: \_\_\_\_\_

**EVENT EQUIPMENT/ELEMENTS NEEDED FROM THE CITY OF WHITEHOUSE:**

(Check/Complete all that apply. Fees will vary.)

Electrical Service: Yes  No  Quantity: \_\_\_\_\_ Describe: \_\_\_\_\_

Water Service: Yes  No  Quantity: \_\_\_\_\_ Describe: \_\_\_\_\_

First Aid Service: Yes  No  Describe: \_\_\_\_\_

Crowd Control Barricades: Yes  No  Quantity: \_\_\_\_\_ Describe: \_\_\_\_\_

Unique Grounds Prep: Yes  No  Describe: \_\_\_\_\_

Traffic Control: Yes  No  Describe: \_\_\_\_\_

Security: Yes  No  Quantity: \_\_\_\_\_ Describe: \_\_\_\_\_

Other City Services: Yes  No  Describe: \_\_\_\_\_

**EVENT MERCHANT & VENDOR INFORMATION**

Merchandise Sold at Event: Yes  No  \_\_\_\_\_ # of vendors needing electricity

Other Items/Services Sold at Event: Yes  No  \_\_\_\_\_ # of vendors needing electricity

Describe Items/Services: \_\_\_\_\_

Describe your plans for crowd control, Police, Event Security, First Aid Services and Disabled Parking.

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Outline in detail the duties your events staff will perform during the event. Include such items as staffing entry and exits points, beer/wine garden area(s), stage area(s), clean-up of debris & litter during and after the event, supervision of parking areas, etc. How many event staff members will you have on site during the event and how you will obtain these event staff.

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Describe your plans for notifying residents and businesses whose traffic patterns & operations will be affected by your event.

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Describe your plans for marketing & promoting your event. Include information on all media & other sources of promotion.

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#### LIABILITY INSURANACE INFORMATION

A Certificate of Insurance for the event must be presented to the City of Whitehouse no later than 15 business days prior to the start date of the event. If the information requested below is not available at the time of application submittal it can be added later but NO LATER THAN THE 15 DAY DEADLINE previously noted.

Insurance Agency: \_\_\_\_\_ Agent's Name: \_\_\_\_\_

Address: \_\_\_\_\_ Phone #: \_\_\_\_\_

Policy #: \_\_\_\_\_ Policy \$ Limits: \_\_\_\_\_

**SITE PLAN REQUIRED:**

**Requirements:**

Two copies drawn to scale showing:

- |  |   |
|--|---|
| <input type="checkbox"/> Location of adjacent structures   | <input type="checkbox"/> Location & size of parking spaces                                    |
| <input type="checkbox"/> Location of points of ingress/egress  | <input type="checkbox"/> Electric transmission & distribution lines on site                   |
| <input type="checkbox"/> Location of fire hydrants   | <input type="checkbox"/> Location & size of signs   |
| <input type="checkbox"/> Location of fire lanes for use by emergency equipment with minimum width of 20' & height clearance of 14' | <input type="checkbox"/> Location of sanitary facilities & trash containers                   |
|  | <input type="checkbox"/> Area designated for alcohol sales and/or consumption (if applicable) |

Applicant is responsible for contacting the departments for inspections. If defects are found those must be corrected prior to issuance of the permit.

Fire Inspection (903) 510-7531

Approved by: \_\_\_\_\_ Date: \_\_\_\_\_

Comments: \_\_\_\_\_

Police Inspection (903) 510-7550

Approved by: \_\_\_\_\_ Date: \_\_\_\_\_

Comments: \_\_\_\_\_

Public Works & Utilities (903) 510-7509

Approved by: \_\_\_\_\_ Date: \_\_\_\_\_

Comments: \_\_\_\_\_

Building Inspection (903) 510-7502

Approved by: \_\_\_\_\_ Date: \_\_\_\_\_

Comments: \_\_\_\_\_

NET Health/NETPHD (if applicable) (903) 535-0030

Approved by: \_\_\_\_\_ Date: \_\_\_\_\_

Comments: \_\_\_\_\_

**INDEMNITY AGREEMENT:**

In consideration for the City of Whitehouse granting the undersigned Event Organizer representative permission to hold the proposed event on public property to display, sell or offer for sale wares, services, and/or food or merchandise within the perimeters of their event venue, the undersigned agrees to assume the defense of an indemnify and save harmless the City, and shall pay all attorney's fees, court costs and other costs incurred in defending such claims, which may accrue against, be charged to, be recovered from or sought to be removed from the City, its employees, officers and agents by reason of or on account of any personal injury or death to any individual(s) or damage to property, both real and personal arising from the undersigned's event and associated activities, if such personal injury or death or damage or property is caused by the acts or omission or negligence of any other person subject to the undersigned's control or associated with the event subject of this agreement. The City, its employees, officers and agents shall not have to give the undersigned any specific types of notice of such claims.

Witness the following signature (Event Organizer signature)

\_\_\_\_\_ (print)

\_\_\_\_\_ (signature)

Witnessed by:

\_\_\_\_\_ (print)

\_\_\_\_\_ (signature)

**AFFIDAVIT OF APPLICANT:**

I certify that the information contained in the Application for Special Event Permit is true and correct to the best of my knowledge and belief that I understand, and agree to abide all regulation, provisions and rules governing Special Events as set forth by the City of Whitehouse. That I understand that this Application is made subject to the rules and regulation established the Whitehouse City Council. I agree to abide by these rules and further certify that, on behalf of the organization, I am authorized to commit that organization, and therefore agree to be financially responsible for any cost and fees that may be incurred by or on behalf of the Event to the City of Whitehouse.

\_\_\_\_\_  
Applicant

\_\_\_\_\_  
Title (Print or type)

\_\_\_\_\_  
Signature of Applicant (Event Organizer)

\_\_\_\_\_  
Date of Application