





# Special Events Application

700 Broad Street, St. Joseph, MI 49085-1276 | sjcity.com | (269) 983-5541

Special event name:\* \_\_\_\_\_

## Event Information

For any question, if there is not room to include a complete response, please include the response on a separate attachment and note "see attached." You may also attach a separate event schedule and /or description in response to questions 1-5. When providing information in an attachment, please refer to the appropriate question number(s) to help the City staff review the application.

1. Requested date(s) and time(s): *[day of week], [month], [date], [year], [time]* \*  
(*ex: Monday, January 1, 2020, 2:00p.m.-4:00p.m.*)

\_\_\_\_\_  
\_\_\_\_\_

2. Is there a requested alternative or rain date for the event timing? *Select one.* \*  Yes  No

If yes, list requested alternative date(s) below: *[day of week], [month], [date], [year], [time]*  
(*ex: Monday, January 1, 2020, 2:00p.m.-4:00p.m.*)

\_\_\_\_\_  
\_\_\_\_\_

3. Please describe the event and its purpose: \*

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

4. What is the requested location(s) of the event: \*

\_\_\_\_\_  
\_\_\_\_\_

5. Is this event expected to reoccur in a future calendar year? \*  Yes  No

If yes, list the annual timing below:

\_\_\_\_\_

6. How many attendees do you expect to host during this event?\*

\_\_\_\_\_



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## Requested City Services

Does the event require any of the following fixtures? \* Please mark any requested fixtures on your attached map.

	Yes	No	Number Requested
Barricades	<input type="radio"/>	<input type="radio"/>	_____
Traffic Cones	<input type="radio"/>	<input type="radio"/>	_____
Rubbish containers	<input type="radio"/>	<input type="radio"/>	_____
Picnic tables	<input type="radio"/>	<input type="radio"/>	_____
Other	<input type="radio"/>	<input type="radio"/>	_____

Does the event require any of the following public services? \*

	Yes	No	If yes, when?
Street sweeping	<input type="radio"/>	<input type="radio"/>	_____
Mowing	<input type="radio"/>	<input type="radio"/>	_____
Rubbish removal	<input type="radio"/>	<input type="radio"/>	_____
Cessation of lawn sprinkling	<input type="radio"/>	<input type="radio"/>	_____
Other	<input type="radio"/>	<input type="radio"/>	_____

## Public Safety & Ordinances

Are you requesting assistance from Public Safety?\*  Yes  No

If yes, please provide details about the assistance requested:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Are you planning to hire security/safety assistance from an outside agency?\*  Yes  No

If yes, please attach information indicating all contractors hired.

Will the event include loud or amplified sounds?\* (ex: music, motor vehicle noises, announcers)  Yes  No

If yes, please provide a description of the sounds:

\_\_\_\_\_  
\_\_\_\_\_

Will the event include bright or flashing lights that are unusual for the location?\*

If yes, please provide a description of the lights:

\_\_\_\_\_  
\_\_\_\_\_

Are alcoholic beverages proposed to be served as part of the event?\*  Yes  No

If yes, please attach a copy of necessary liquor licenses.



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## Event Map

Please attach a map of the requested location(s) with the following information, as applicable: \*

For your convenience, maps of popular event spaces are included as part of this application. If your event is taking place in Lake Bluff Park, Downtown, or if you are running a 5k and anticipate more than 500 participants, please overlay your event plans on the relevant included map.

- Any streets or parking lots that you are asking be blocked off or reserved
- Remote parking lots
- Parade or race route
- Location of specific events or objects  
*(ex: rides, bleachers, medical care, water stations, exhibits, parking, pickup/drop-off, lighting, performances, etc.)*
- Information on the size, content and location of requested signs  
*(Note: small directional signs that do not obstruct pedestrian or vehicular traffic do not need to be included in this attachment)*
- Location and description of utilities requested *(ex: electric service, water)*
- Location of requested fixtures *(ex: barricades, trash receptacles, picnic tables)*

## Other Requests & Attachments

Does the applicant have any other requests that are not listed in this form, or other details that City Staff and Commission should know when considering this event for approval? \*  Yes  No

If yes, please detail them below:

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Please be sure to include the following attachments as applicable:

- Certificate of Insurance \*—A Certificate of Insurance for minimum \$1,000,000 of general liability coverage must be obtained one month before the event. Additional Insured includes the following: The City of St. Joseph, all elected and appointed officials, all employees and volunteers, agents, all boards, commissions, and/or authorities and board members, including employees and volunteers thereof.
- Security contractors—Please attach information for any security contractors that may be used for the event, including agency name, staff and services requested, and contact information.
- Liquor license—Please attach all necessary liquor licenses if the event plans to incorporate alcohol. Licenses must be obtained at the time of application submittal.