SPECIAL EVENT PERMIT APPLICATION FORM

1.	SPONSOR:							
	ADDRESS	S:						
	PHONE: _							
	EMAIL/W	EBSITE:						
2.	EVENT T	YPE (Circle all	that apply):					
	Parade	Festival	Assembly	Street Closure	Music Performances			
	Rally	Marches	Walks/Runs	Fund Raisers	Private Party			
	Other:							
3.	ADDRESS	EVENT CONTACT PERSON(S):						
4.	ON-SITE	CONTACT PER	RSON(S):					
	CELL PHO	ONE:						
	EMAIL: _							
	LOCATIO	N DUDING EV	ENT.					

5.	EVENT LOCATION:					-		
6.	PARKING AND TRAFFIC PLAN MUST BE ATTACHED.							
	STREET CLOSURE? YES NO LOCATIONS(S): Noted on attached site plan.							
	BARRICADES NEEDED? (additional fee applies) YES NO							
	ADDITIONAL SIGNAG	ADDITIONAL SIGNAGE? YES NO						
ба.	BUSINESSES AFFECTED: The Special Event Promoter must notify all businesses that may be affected by an event that requires street closures and obtain written signatures that they have been notified. Any business objecting to the event and/or street closure must submit objections to the Zoning administrator at City Hall in written format specifically stating the reasons for their objections prior to consideration of the permit.							
7.	EVENT DATES:	EVENT DATES: to						
	EVENT START TIME: _		EVENT	END TIME	Ξ:			
8.	SET UP TIME: TAKE DOWN TIME:							
9.	RAIN DATE/TIME/PLA	CE:						
10.	SIZE OF EVENT: (estimated number of people on-site at one time)							
	() 1-100	()	100-250	()	250-500			
	() 500-1,000	()	1,000-2,000	()	over 2,000			
	If over 2,000, give estimate of number:							
11. PORTABLE TOILETS: Number of toilets being provided:								
	Location(s) of toilets:							
12.	TYPES OF ACTIVITIES	TYPES OF ACTIVITIES/VENUES:						

b. FOOD VENDORS (NAME, ADDRESS, PHONE FOR EACH)
U. 1 OOD VENDORS (IVAIVIE, ADDRESS, 1 HONE I OR EACH)
c. TENTS
UTILITIES TO BE USED (EQUIPMENT AND SOURCE OF POWER):
Electric (contact Waverly Utilities 319-559-2000):
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Electric (contact Waverly Utilities 319-559-2000): Shelter(s) (contact Leisure Services 319-352-6263, additional fee applies): Picnic Table(s) (contact Leisure Services 319-352-6263, additional fee applies):
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15.	SECURITY:		
	Have the Police been consulted about crowd or traffic contr	ol? YES	NO
16.	SOURCE OF GARBAGE/RUBBISH REMOVAL SERVICE Garbage Containers: YES NO #		
17.	SITE PLAN ATTACHED?	YES	NO
18.	INDEMNITY AGREEMENT SIGNED AND ATTACHED	P? YES	NO
19.	INSURANCE CERTIFICATE ATTACHED?	YES	NO
20.	DAMAGE DEPOSIT INCLUDED? (Amount \$100/\$250)	YES	NO
21.	PERMIT FEE INCLUDED? (Amount \$25)	YES	NO
truthf	e read this Special Event Agreement and Permit Application problems of the Application. I agree that I will obtain any collow the guidelines and requirements set forth in the packet.		•
Appli	cant Signature:Da	te:	
APPF	ROVED BY:		
Chief	of Police:Da	te:	
City A	Attorney:Dat	te:	
Leisu	re Services Director:Da	te:	
Public Works Director:Date:			
City A	Administrator:Da	te:	

INDEMNITY AGREEMENT

In consideration for the granting of	f permission by the City of Waverly, Iowa to the
undersigned for the use of the following de	escribed property:

For the follow	ing purpose onl	y:					
On the followi	ing date(s) only:	:					
officers and en	ed agrees to def nployees, from ag out of or caus	and against a	any and al	l claims f			
The undersigned further agrees upon receipt of notice from the City of Waverly to defend at its own expense the City of Waverly, its agents, officers and employees from any action or proceeding against the City of Waverly, its agents, officers or employees arising out of or caused by the use of such property. The undersigned agrees that a judgment obtained in any such action or proceeding shall be conclusive in any action by the City, its agents, officers or employees against the undersigned, when so notified as to the undersigned's cause of the injury or damage, as to the liability of the City, its agents, officers and employees to the plaintiff in the first named action, and as to the amount of the damage or injury. The City of Waverly, its agents, officers and employees may maintain an action against the undersigned to recover the amount of the judgment together with all the expenses incurred by the City, its agents, officers and employees in the action.							
THIS INDEM	D THIS INDEM NITY AGREEM I, AND I AM S	MENT, I AM	I AUTHO	RIZED T	O SIGN T	THIS INDE	MNITY
Dated this	day of		20				
Organization:							
By:							
Title:							