

BOROUGH OF RED HILL

56 WEST 4TH STREET

RED HILL, PA 18076

Phone: 215-679-2040 - FAX: 215-679-0527

www.redhillborough.org - info@redhillborough.org

APPLICATION FOR SPECIAL EVENT PERMIT

Application must be submitted 90 days prior to the event; exceptions are the sole discretion of Borough Council. _____ (Initial) By initially here, the applicant understands the application is not considered complete unless all applicable questions are answered and all attachments included in accordance with Red Hill Borough Code Chapter 13 Part 5 Special Events, License Agreement and any other documentation required by the Borough. Application does not guarantee approval.

EVENT NAME: _____

Date(s) of Event: _____

Event Start Time: _____ End Time: _____

Applicant(s)/Authorized Agent: _____

Organization/Business Name: _____

Organization/Business Type: For Profit Nonprofit-Tax
ID# _____

Organization/Business Address:

Street/P.O. Box _____ City _____ State _____ Zip _____

Organization/Business Phone: _____ Fax: _____

Primary Contact: _____
(If different from applicant)

Primary Contact Phone: _____ Mobile: _____

E-Mail: _____

Event Day "On Site" Contact: _____ Mobile: _____
(If different than primary contact)

EVENT INFORMATION:

Set-up: DATE: _____ TIME: _____

Take-down: DATE: _____ TIME: _____

Event Location: (Please list the proposed event location and attach a map of the proposed logistical layout for your event including location of vendors, lighting, portable toilets and any other entertainment/structures. Include any water aid and/or first aid stations.)

Parking Provisions (Please provide details of where event staff, participants and attendees will park):

Total Attendees Expected: _____ # of Staff/Volunteers: _____ # of Participants/Spectators: _____

EVENT SCOPE:

Has this event been produced before? Yes No

Has this event previously received an Event Permit from Red Hill Borough? Yes No

Is this an Annual Event? Yes No

Briefly describe the scope of your event: (Please provide a detailed list of individual groups, vendors and/or units participating.)

PLEASE CHECK ALL STRUCTURAL ELEMENTS THAT APPLY:

- TENT(S) BOOTH(S) TABLE(S) CHAIR(S) STAGE(S) FENCING
 POWER GENERATOR FOOD TRUCKS** OTHER _____

**Requires Additional Permit.

PLEASE CHECK ALL UTILITY ELEMENTS THAT APPLY:

- ELECTRICITY WATER PROPANE/FLAME** POWER GENERATOR

**Additional Permitting may apply.

PLEASE CHECK ALL ENTERTAINMENT ELEMENTS THAT APPLY:

- AMPLIFIED SOUND/PA SYSTEM PERFORMER(S) BAND(S) INFLATABLE(S) **
 CHILDREN ACTIVITIES GAMES RIDES OTHER _____

**Requires Additional Insurance

PLEASE INDICATE THE NUMBER OF PORTABLE TOILETS YOU WILL HAVE AT YOUR EVENT: (Please detail location(s) on event map.) _____

LIGHTING: (Please list the type, quantity, hours of operation and detail location on event map.)

EVENT CLEAN-UP:

NAME: _____ **MOBILE:** _____

PLEASE DESCRIBE YOUR TRASH/RECYCLING PLANS FOR THE EVENT:

PLEASE CHECK ALL FOOD/BEVERAGE ELEMENTS THAT APPLY:

SALE OF FOOD/BEVERAGES** DISTRIBUTION OF FOOD/BEVERAGES **

SALE OF ALCOHOLIC BEVERAGES** DISTRIBUTION OF ALCOHOLIC BEVERAGES **

**Alcohol Requires Additional Insurance and Licenses from the Liquor Control Board. Food Requires Licenses and Approval from Montgomery County Department of Health

STREET CLOSURES: (Please indicate the date/time and list of street closures requested for your event. Map required.)

TRAFFIC CONTROL SERVICES: (Please detail your plans for traffic control.)

Additionally please provide the following:

- All Insurances Required in Ordinance No. 2019-559 § C. Additional Documentation Required.
- Applications Required in Ordinance No. 2019-559 § D. Food Vendor Applications and Inspections.
- Completed License Agreement Including Exhibit “B” General Release and Indemnification
- All Required Licenses and Approvals from Montgomery County Department of Health and/or the Pennsylvania Liquor Control Board

I have read Red Hill Borough Code Chapter 13 Part 5 Special Events, License Agreement and 16-103 Prohibited Conduct. [Ord. 236, 6/2/1977; as amended by Ord. 340, 12/6/1988] and agree to abide by all rules and regulations. Failure to do so will result in the cancellation of this application and/or financial charges. I understand that any exception (s) to the regulations must be approved by Borough Council and that the Borough authorities may revoke my permission at any time. By signing below, I represent that I am duly authorized by the Organization to bind the Organization to all terms of the Policies including, without limitation, the Damage Deposit, Certificate of Insurance and Indemnification provisions.

Signed: _____ Date: _____