

## City of St. Ignace Special Events Application

Complete and return this application to the City Manager's Office at least 21 calendar days prior to the starting date of the event.  
A new application must be submitted each year.

<b>Event</b>		
Event Name:		
Describe the Event:		
<b>Sponsoring Organization Information</b>		
Legal Business Name:		
Address:	City:	State/Zip:
Mailing Address:	City:	State/Zip:
Telephone:	Email:	
Contact Name:	Title:	
Telephone	Email:	
<b>Contact Person on Day of Event</b>		
Name:	Title:	
Address:	City	State/Zip:
Telephone:	Cell:	Email:
Type of Event (Check one - See Special Events Policy for additional information)		
<input type="checkbox"/> City Operated/Sponsored Event <input type="checkbox"/> Political or Ballot Issue Event <input type="checkbox"/> Run Event <input type="checkbox"/> Co-sponsored Event (all parties must provide sponsoring info and sign application) <input type="checkbox"/> Other (describe) <input type="checkbox"/> Non-Profit Event <input type="checkbox"/> Wedding <input type="checkbox"/> Block Party <input type="checkbox"/> For Profit Event <input type="checkbox"/> Video or Film Production		
<b>Event Information</b>		
Event Location(s):		
Event Date(s):		
Event Hours:		
Estimated date/time for set up:		
Estimated date/time for clean up:		
Describe set up and clean up procedures (include specifically who will be taking care of trash):		

Event Information (continued)

Estimated DAILY attendance:

Describe crowd control plans for this event:

Describe the Special Event's impact on adjacent commercial and residential property:

Will sidewalks be used    ( ) YES    ( ) NO    *If yes, include a detailed map outlining the proposed sidewalk use*

Describe sidewalk use:

Will street closures be necessary?    ( ) YES    ( ) NO

*If yes, include a detailed map indicating road closures, emergency vehicle access, and barricade locations*

*The City of St. Ignace does not have authority to close County roads.*

Describe street closures:

\* Streets closed: Date/Time:

\* Streets re-open: Date/Time:



Event Information (continued)

**Will the event require the use of any of the following municipal equipment:**

*Sponsoring organization should expect to be charged for use, placement, and maintenance of these items*

- Trash Receptacles      Quantity:
- Barricades              Quantity:
- Traffic Cones            Quantity:
- Other (describe):

*\*Sponsoring organization may be required to provide a dumpster\**

**Will the following be constructed or located in the event area?**

*No stakes of any kind allowed on asphalt*

- | Item                              | Item  |
|-----------------------------------|---|
| <input type="checkbox"/> Booths   | <input type="checkbox"/> Tables   |
| <input type="checkbox"/> Tents    | <input type="checkbox"/> Rides  |
| <input type="checkbox"/> Awnings  | <input type="checkbox"/> Portable Toilets <i>(may be required depending on event)</i> |
| <input type="checkbox"/> Canopies | <input type="checkbox"/> Other <i>(describe)</i>                                      |

**You must attach a plan of the proposed layout. Include the proposed location of booths, tents, tables, portable toilets, rides, routes, etc.**

Will the event have kiddie rides, inflatables (i.e. moonwalk), amusement rides, climbing walls, live animals, hot air balloon, etc.?

- YES                       NO *If yes, additional insurance coverage will be required*

**If yes, describe in detail the types of attractions proposed:**

Event Information (continued)

Will the event have food, beverage or concessions  YES  NO

*(See Section X of the Special Events Policy for health department approvals and temporary food license requirements)*

**Describe:**

Do you plan to have alcohol served at this event?  YES  NO

*\* A \$50.00 fee applies to special liquor license applications and Liquor Liability Insurance is required.*  
Include proposed location(s) on event layout and describe measures to be taken to prohibit the sale of alcohol to minors or visibly impaired individuals

Will there be temporary electricity at this event?  YES  NO

*\* An electrical permit is required. Include proposed locations on event layout*

Generators  Use of Light Pole Outlets  Temporary Distribution Panel

Do you plan to have special event signs?  YES  NO

Signs must conform to City's ordinances

Describe signs, proposed locations, etc.

Do you plan to use city entrance signs or banner

YES  NO

If yes you must apply for use through the City Entrance Sign Ordinance/Municipal Banner System Policy

Application Check List (failure to provide necessary documentation will delay application review and approval)

**I have attached the following items:**

- ( ) Completed Application
- ( ) Event Map (includes detailed event layout for vendors, rides, booths, electrical needs, etc.)
- ( ) Detailed Plan showing road closures, sidewalk use, etc.
- ( ) Certificate of Insurance and Indemnification (due to City Manager's Office within 1 week following notice of event approval)
- ( ) Insurance Policy endorsement (due to City Manager's Office within 1 week following notice of event approval)
- ( ) Event Signage (description)
- ( ) Driver's License of applicant

**If document is missing, please explain:**

The applicant and sponsoring organization understands and agrees to:

Provide a certificate of insurance with all coverages deemed necessary for this event, name the City of St. Ignace as an additional insured on all applicable policies, provide a separate copy of the insurance policy Endorsement, and submit the required documents to the City Manager's Office no later than one week following notice of event approval.

Execute an Indemnification Agreement on the sponsoring organizations letterhead and submit it to the City Manager's Office no later than one week following notice of the event approval.

Comply with all City and County ordinances and applicable State laws, City policies and acknowledges that the special events permit does not relieve the applicant or sponsoring organization from meeting any application requirements of law or other public bodies or agencies;

Promptly pay any billing for City services which may be rendered or deemed necessary as part of the event and event approval.

Applicant and sponsoring organization further understands the approval of this special event may include additional requirements and/or limitations based on the City's review of this application, in accordance with the City's Special Events Policy. The applicant and sponsoring organization understands that it may be necessary to meet with City staff during the review of this application and that City Council approval may be necessary. The applicant agrees the sponsoring organization will operate the event in conformance with the written approval.

Applicant understands that he/she (or the sponsoring organization) is responsible for contacting the Michigan Liquor Control Commission and/or the County Health Department to secure any and all permits required for this event.

As the duly authorized agent of the sponsoring organization, I hereby apply for approval of this Special Event and affirm the above understandings. The information provided on this application is true and complete to the best of my knowledge.

Applicant <b>Signature</b>	Date
<b>Co-Applicant</b> Signature	Date
<b>Complete this application and return it, along with all required documentation, to the City Manager's Office at least 21 calendar days prior to the starting date of the event. Please note that a new application must be submitted each year.</b>	Receipt Date