



*Brenda Green  
City Clerk*

**SPECIAL EVENT APPLICATION**

(Must be submitted 30 days prior to event)

DATE \_\_\_\_\_

**APPLICANT INFORMATION**

Name \_\_\_\_\_ Phone (\_\_\_\_\_) \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

**ORGANIZATION/BUSINESS SPONSORING EVENT**

Name \_\_\_\_\_ Phone (\_\_\_\_\_) \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

**CONTACT PERSON ON DAY OF EVENT**

Name \_\_\_\_\_ Phone (\_\_\_\_\_) \_\_\_\_\_

E-mail \_\_\_\_\_

**DESCRIPTION OF EVENT**

Date of Event \_\_\_\_\_ Hours of Event \_\_\_\_\_

Estimated time for: Set-up \_\_\_\_\_ Clean-up \_\_\_\_\_  
(days/hours needed)

Number of participants \_\_\_\_\_ Number of vehicles/trailers \_\_\_\_\_ Estimated attendance \_\_\_\_\_

Description of event: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Please provide details of the proposed plans for the following items relative to your special event. If needed, please use an additional sheet(s) and attach to this application.

Security: \_\_\_\_\_

Crowd Control: \_\_\_\_\_

Traffic Control: \_\_\_\_\_

Street Closing: \_\_\_\_\_

Food & Beverage: \_\_\_\_\_

Booths/Tents/Awnings: \_\_\_\_\_

Picnic Tables/Refuse Barrels/Barricades: \_\_\_\_\_

Parking for Attendees: \_\_\_\_\_

Sanitation/Restrooms: \_\_\_\_\_

Noise Control: \_\_\_\_\_

Clean-up Procedures: \_\_\_\_\_

Impact on adjacent business/commercial establishments: \_\_\_\_\_

Impact on adjacent residential area: \_\_\_\_\_

Impact on parking on nearby lots and/or streets will be: \_\_\_\_\_

Impact on traffic: \_\_\_\_\_

If affected, what is the anticipated duration? \_\_\_\_\_

Will music be provided? \_\_\_\_ Yes \_\_\_\_ No If yes: Starting time \_\_\_\_\_ Ending time \_\_\_\_\_

Location music will be played from: \_\_\_\_\_

Will alcoholic beverages be permitted on premises? \_\_\_\_ Yes \_\_\_\_ No

If yes, what measures will be taken to prohibit the sale of alcohol to minors and/or visibly impaired persons? \_\_\_\_\_

**PLEASE NOTE:** If a commercial establishment not licensed by the Michigan Liquor Control Commission provides alcohol to its patrons in the normal course of business, a special event application is necessary. Applicant shall provide evidence of insurance and satisfactory proof that the insurance carrier has been apprised of the proposed use of alcoholic beverages.

**PLEASE INCLUDE:**

- \$125 Application Fee (non refundable)\*
- Copy of applicant's current identification
- Permission letter (sample included)
- Diagram of proposed site

**UPON COUNCIL APPROVAL**

- \$100 for each mechanical ride
- \$100 for each game
- Certificate of Liability Insurance with the City of Highland Park named as Certificate

**FOR OFFICIAL USE**

Number of games \_\_\_\_\_ x \$100 \$ \_\_\_\_\_

Number of rides \_\_\_\_\_ x \$100 \$ \_\_\_\_\_

Application fee\* \_\_\_\_\_ \$125.00

**TOTAL** \$ \_\_\_\_\_

Receipt # \_\_\_\_\_

Receipt # \_\_\_\_\_

Applicant acknowledges that he/she is responsible for contacting the Michigan Liquor Control Commission and/or the Wayne County Health Department to secure any and all permits required from the State or County for this event.

Applicant also acknowledges that he/she will be billed for the entire cost of City services after the event.

\_\_\_\_\_  
Signature

Anticipated cost to City: \_\_\_\_\_

Prepayment amount \$ \_\_\_\_\_

Date paid \_\_\_\_\_

**APPROVAL:** Police Chief \_\_\_\_\_ Date \_\_\_\_\_

Fire Chief \_\_\_\_\_ Date \_\_\_\_\_

City Council \_\_\_\_\_ Date \_\_\_\_\_

City Clerk \_\_\_\_\_ Date \_\_\_\_\_



SPECIAL EVENT  
PROPERTY OWNER PERMISSION LETTER

Date: \_\_\_\_\_

Chief of Police  
City of Highland Park  
12050 Woodward  
Highland Park, MI 48203

To Whom It May Concern:

Our establishment \_\_\_\_\_ hereby consents to the special event  
Name and address  
involving \_\_\_\_\_ on \_\_\_\_\_ between/near  
Street  
\_\_\_\_\_  
Cross Street(s)

It is understood that this special event will take place on \_\_\_\_\_ from \_\_\_\_\_  
Date(s) Times

It is also understood that this special event **will / will not** involve our establishment.  
Circle one

\_\_\_\_\_  
Signature

Print name: \_\_\_\_\_