

VLLAGE OF BALLSTON SPA SPECIAL EVENTS APPLICATION

Date of Notice: _____

EVENT INFORMATION:

Name, Title and contact information for Event: _____

Purpose of Event: _____

Name of Event: _____

Location of Event: _____

Date of Event: _____

Time of Event: _____

Date and Time for Set Up: _____

Date and Time for Take Down: _____

Event Activities: _____

(entertainment, vending, gaming, fireworks, etc. Please attach any additional information. Please be advised that all outside vendors and entertainment shall fill out a vendor permit application)

Name of Owner of Facilities or Property: _____

Facilities Manager and contact information: _____

Number of people expected to attend event: _____

Will Alcoholic Beverages be served? Yes/No Sold? Yes/No

Does the Event require Fire/EMT equipment? Yes/No

Does the Event require DPW employees? Yes/No

ADDITIONAL REQUIREMENTS:

Attach Site Map of event, which includes a sketch or map, schedule of events and/or parade routes showing street closures/barricades, booths, beer garden, stage set-up or any other activities relating to the event and event site. Please include street names, boundaries marked on map, placement of any barricades, fencing, tables, tents etc.

Attach other permits (DOH, SLA, etc)

Attach Certificate of Insurance

Attach Hold Harmless

Event Coordinator Signature

Date

SPECIAL EQUIPMENT/ SERVICES REQUESTED:

Item	Quantity	Details – locations, types, sizes, etc.
Police:		
Traffic control		
Street Closings		
Security (company)		

Streets:

Barricades		
Stop signs		
Traffic cones		

Water:

Water test		
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Sewer:

Port-a-johns		
Grease barrels		

Electric:

Power needs		
Additional power		

Fire/ EMS:

Fire-fighting equipment		
First aid needs		

Codes:

Tents -(sizes, certified, stakes covered)		
Access - crowd movement		

Parks:

Trash cans		
Trash removal		
Parking		

NYS DOT: Road Closure		
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