

NOISE (MUST CHECK ONE) NO YES

(IF YES, COMPLETE INFORMATION BELOW)

 LIVE BAND STEREO LOUDSPEAKER DJ OTHER:

NAME OF BAND(S) OR DJ(S):

DESCRIPTION OF SOUND EQUIPMENT OR BAND(S):

TYPE OF MUSIC (GENERAL):

ALCOHOL PRESENT/PROVIDED (MUST CHECK ONE)

WILL YOU BE SERVING ALCOHOL AT YOUR PUBLIC EVENT?

 NO YES

(IF YES, YOU MUST PROVIDE A PLCB SPECIAL PERMIT AND FOLLOW ALL PLCB REQUIREMENTS)

RESPONSIBLE PARTY IN ATTENDANCE AT EVENT(S)

NAME:	CELL:	OTHER PHONE:	EMAIL:
ADDRESS:	CITY:	STATE:	ZIP CODE:
WILL THERE BE PRIVATE SECURITY PRESENT? <input type="checkbox"/> NO <input type="checkbox"/> YES		IF YES, NAME OF SECURITY COMPANY:	

WILL PRIVATE PROPERTY BE USED IN CONJUNCTION WITH THIS EVENT?

 NO YES

(IF YES, WRITTEN PERMISSION OF THE OWNER OF THE PRIVATE PROPERTY MUST ACCOMPANY THIS APPLICATION)

TENTS/STAGES/TEMPORARY STRUCTURES (MUST CHECK ONE)

WILL THERE BE TENTS, STAGES OR TEMPORARY STRUCTURES INSTALLED FOR THE EVENT?

 NO YES

(IF YES, COMPLETE INFORMATION BELOW)

TENT:	DIMENSIONS:	RENTAL COMPANY:
(IF TENT IS LARGER THAN 400 SQ. FT. YOU MUST COMPLETE A TENT APPLICATION PERMIT – PLEASE CONTACT THE CITY FIRE INSPECTOR AT 814-949-3398)		
STAGE:	DIMENSIONS:	RENTAL COMPANY:
OTHER:	DIMENSIONS:	RENTAL COMPANY:

FIREWORKS (MUST CHECK ONE)

WILL THERE BE A FIREWORKS DISPLAY AT THE EVENT?

 NO YES

(IF YES, YOU MUST COMPLETE A FIREWORKS DISPLAY APPLICATION/PERMIT – PLEASE CONTACT THE CITY FIRE INSPECTOR AT 814-949-3398)

VENDOR PERMITS (MUST CHECK ONE)

WILL THERE BE VENDORS SELLING GOODS, SERVICES OR FOOD AT THE EVENT?

 NO YES

(IF YES, EACH VENDOR MUST OBTAIN A VENDOR PERMIT FROM THE FINANCE DEPARTMENT AT CITY HALL, SUITE 104, IF THEY DO NOT HAVE A CITY BUSINESS LICENSE)

SITE CLEAN UP

IT IS THE APPLICANT'S RESPONSIBILITY TO CLEAN THE EVENT PREMISES AND REMOVE ALL TRASH, GARBAGE AND RECYCLABLES FOLLOWING THE EVENT. THE CITY REQUIRES PLASTIC BOTTLES, GLASS BOTTLES, ALUMINUM AND STEEL CANS, AND CARDBOARD TO BE RECYCLED. IT IS YOUR RESPONSIBILITY TO ARRANGE FOR THE COLLECTION AND SEPARATION OF TRASH AND RECYCLING FOR ALL PARTICIPANTS AND VENDORS. ALL CONTAINERS FOR RECYCLING SHOULD BE CLEARLY LABELED AND PLACED NEXT TO A TRASH CAN.

IF YOU NEED ASSISTANCE WITH RECYCLING ARRANGEMENTS OR VENDOR EDUCATION, PLEASE CONTACT THE IRC AT 814-942-7472.

THE CITY MAY ASSESS ADDITIONAL FEES FOR DAMAGES AND/OR CLEAN-UP AFTER AN EVENT

APPLICANT SIGNATURE & WAIVER OF LIABILITY

ALL APPLICANTS MUST APPLY FOR A PERMIT 30 DAYS IN ADVANCE OF EVENT

I (WE) UNDERSTAND AND WILL COMPLY WITH THE CONDITIONS OF THIS PERMIT. IF I (WE) FAIL TO ANSWER ALL QUESTIONS COMPLETELY AND ACCURATELY, AND FAIL TO PROVIDE THE PROPER DOCUMENTATION, THIS PERMIT WILL NOT BE APPROVED. I (WE) FURTHER UNDERSTAND THAT AN APPROVED PERMIT MAY BE REVOKED BY THE CITY MANAGER FOR FAILURE TO COMPLY WITH THE TERMS AND CONDITIONS OF THIS PERMIT.

I (WE) THE UNDERSIGNED, DO HEREBY AGREE THAT AS A CONDITION TO THE CITY OF ALTOONA PUBLIC GATHERING/EVENT PERMIT, AND IN ORDER TO HOLD AN EVENT WITHIN THE CITY OF ALTOONA, TO INDEMNIFY AND HOLD HARMLESS THE CITY OF ALTOONA AND THE ALTOONA PARKING AUTHORITY FROM ANY EXPENSES, DIRECT OR INDIRECT, AND ANY CLAIMS, DEMANDS, OR CAUSES OF ACTION WHATSOEVER, IF ANY, ARISING BY REASON OF THE USE OF PUBLIC PROPERTY FOR THE EVENT AS DESCRIBED ON THE ATTACHED PERMIT.

FURTHER, I (WE) DO HEREBY AGREE THAT CLEAN-UP AND RESTORATION OF THE FACILITY AND/OR PUBLIC PROPERTY AFTER EACH EVENT IS THE RESPONSIBILITY OF THE PERMIT HOLDER. WE MAY CHARGE YOU ADDITIONAL FEES FOR ANY DAMAGES, CLEAN-UP OR PROBLEMS OCCURRING AFTER AN EVENT.

IN WITNESS WHEREOF,

THE PARTIES HERETO BY THEIR PROPER SIGNATURE DO HEREBY EXECUTE THIS APPLICATION AND WAIVER ON:

(DAY) _____ (MONTH) _____, (YEAR) 20_____.

APPLICANT'S SIGNATURE

CITY OFFICIAL SIGNATURE

ORGANIZATION (IF APPLICABLE)

**ATTACHMENT A
STREET CLOSURE PERMIT APPLICATION**

EVENT INFORMATION

EVENT TITLE & DESCRIPTION:		
EVENT TYPE: (FESTIVAL, RACE, PARADE, MARCH, CONCERT, RESIDENTIAL PARTY ETC.)		
STREET(S) AND AVENUE(S) TO CLOSE:		
EVENT DATE(S):		
EVENT START TIME:	EVENT END TIME:	
STREET CLOSURE TIME:	STREET OPENING TIME:	
CONTACT NAME:	EMAIL:	
NAME OF ORGANIZATION/COMMUNITY GROUP:		
ADDRESS:	CITY:	STATE/ZIP CODE:
CELL PHONE:	OTHER PHONE:	

APPLICANT'S SIGNATURE **DATE**

OFFICIAL USE ONLY

PERMISSION IS HEREBY GIVEN TO CLOSE THE ABOVE LISTED STREET(S)/AVENUE(S)/ALLEY(S).	
ON: (DATE(S))	
FOR (TYPE OF EVENT):	
FROM (START TIME):	TO (END TIME):

UNDER AND SUBJECT TO THE PROVISIONS AND REQUIREMENTS OF THE CITY OF ALTOONA CODE OF ORDINANCES, THE CITY OF ALTOONA POLICE DEPARTMENT AUTHORIZES THIS STREET CLOSURE PERMIT IN EFFECT ON THE ABOVE DATE(S).

TRAFFIC/SPECIAL EVENTS OFFICER **CHIEF OF POLICE**

DATE APPROVED: _____

ATTACHMENT B
PARKING AUTHORITY LOT USE PERMIT APPLICATION

EVENT INFORMATION

EVENT TITLE & DESCRIPTION:		
EVENT TYPE: (FESTIVAL, RACE, PARADE, MARCH, CONCERT, ETC.)		
EVENT DATE(S):		
EVENT START TIME:	EVENT END TIME:	
PARKING USE START TIME:	PARKING USE END TIME:	
CONTACT NAME:	EMAIL:	
NAME OF ORGANIZATION/COMMUNITY GROUP:		
ADDRESS:	CITY:	STATE/ZIP CODE:
CELL PHONE:	OTHER PHONE:	
PARKING AUTHORITY LOT #(S):		
PARKING AUTHORITY SPACES: (# OF SPACES):		

OFFICIAL USE ONLY

PERMISSION IS HEREBY GIVEN TO UTILIZE THE FOLLOWING PARKING AUTHORITY LOTS AND/OR SPACES:	
ON (DATE(S)):	
FOR (TYPE OF EVENT):	
FROM (START TIME):	TO (END TIME):

PARKING AUTHORITY FEES

FOR USE OF PARKING AUTHORITY LOTS AND/OR SPACES DURING THE WORK WEEK:		
LOT #'S:	X COST PER LOT: \$	X HOW MANY HOURS:
AND/OR # OF SPACES:	X COST PER SPACE: \$	X HOW MANY HOURS:
= TOTAL PA AMOUNT ASSESSED FOR THIS EVENT: \$		

UNDER AND SUBJECT TO THE PROVISIONS AND REQUIREMENTS OF THE CITY OF ALTOONA CODE OF ORDINANCES AND THE ALTOONA PARKING AUTHORITY RULES AND REGULATIONS, THE APA AUTHORIZES THE ABOVE CLOSURES OF PARKING LOTS AND/OR SPACES IN EFFECT ON THE ABOVE DATE(S).

PARKING AUTHORITY REPRESENTATIVE

SP PLUS PARKING REPRESENTATIVE

DATE APPROVED: _____

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<input type="checkbox"/> CERTIFICATE OF INSURANCE	<input type="checkbox"/> PLCB SPECIAL PERMIT (REQUIRED IF SELLING AND/OR SERVING ALCOHOL)
<input type="checkbox"/> ROAD CLOSING APPROVED PERMIT	<input type="checkbox"/> WRITTEN PERMISSION OF OWNER OF PRIVATE PROPERTY (REQUIRED FOR USE OF PRIVATE PROPERTY)
<input type="checkbox"/> PARKING AUTHORITY APPROVED PERMIT	<input type="checkbox"/> SPECIAL EVENTS OPERATIONS PLAN (IF REQUIRED)

PUBLIC GATHERING/EVENTS PERMIT

<input type="checkbox"/> APPROVED (SEE CONDITIONS OF APPROVAL BELOW)	<input type="checkbox"/> DENIED (SEE REASONS FOR DENIAL BELOW)
CONDITIONS OF APPROVAL/REASONS FOR DENIAL	

NOISE PERMIT

<input type="checkbox"/> APPROVED (SEE CONDITIONS OF APPROVAL BELOW)	<input type="checkbox"/> DENIED (SEE REASONS FOR DENIAL BELOW)
CONDITIONS OF APPROVAL/REASONS FOR DENIAL	

ALCOHOL PERMIT

<input type="checkbox"/> APPROVED (SEE CONDITIONS OF APPROVAL BELOW)	<input type="checkbox"/> DENIED (SEE REASONS FOR DENIAL BELOW)
CONDITIONS OF APPROVAL/REASONS FOR DENIAL	

CITY MANAGER SIGNATURE

DATE

DISCLAIMER STATEMENT FOR APPROVAL OF PERMIT: PERMISSION IS GRANTED TO USE PUBLIC PROPERTY AT SPECIFIED LOCATIONS ON DATE AND TIME STIPULATED ON THIS PERMIT. WITH THE ISSUANCE OF THIS PERMIT, THE APPLICANT ACKNOWLEDGES THAT CONFLICTS MAY ARISE WHICH NECESSITATE THE REVOCATION OF THIS PERMIT. UPON RECEIVING SUCH NOTIFICATION FROM THE CITY, THE HOLDER MAY RELOCATE SAID EVENT WITH CITY APPROVAL.