# City of Stockbridge
## Temporary Special Event Permit Application

4640 North Henry Blvd, Stockbridge, GA 30281 • 770.389.7900(t) • 770.389.5484(f)

**APPLICATIONS MUST BE SUBMITTED TO CITY HALL A MINIMUM OF 30 DAYS PRIOR TO SCHEDULED EVENT**

### Applicant Information:

<table>
<thead>
<tr>
<th>Event Organizer/Sponsor</th>
<th></th>
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</thead>
<tbody>
<tr>
<td>Address</td>
<td></td>
</tr>
<tr>
<td>City, State, Zip</td>
<td></td>
</tr>
<tr>
<td>Contact Person</td>
<td></td>
</tr>
<tr>
<td>Contact Phone Number</td>
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<tr>
<td>Contact Email Address</td>
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### Event Information

<table>
<thead>
<tr>
<th>Proposed date(s)</th>
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<tbody>
<tr>
<td>Proposed location(s)</td>
<td></td>
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<tr>
<td>Proposed time of event (please include setup time, event time and breakdown time)</td>
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### Type of Event (Check all that apply)

- [ ] Street Parade: _____# of floats _____# of marching units _____# of vehicles
- [ ] Rally/Assembly
- [ ] Fair/Festival: _____# of vendor booths (including food)
- [ ] Run/Walk
- [ ] Social/Corporate Event (Invite Only)

**Total anticipated participation: __________________**

### Purpose of the event:

________________________________________________________________________________________
________________________________________________________________________________________

### What parking is being used/requested for the event:

________________________________________________________________________________________
________________________________________________________________________________________
________________________________________________________________________________________

*If private parking is being used, please provide a letter of approval from parking lot owner.

### Will the event use or require the following services?

- [ ] Closing of public streets?
- [ ] Rerouting of vehicle of pedestrian traffic?
- [ ] Use of police officers for security?
- [ ] Staging?
Use of electricity?  
Use of water?  
Restroom facilities? Which ones?  
Port-a-potties? Must reserve ample potties for size of event. Guideline sheet available.  
Cones? How many?  
Barricades? How many?  
Trash cans? How many?  
Use of personal signs or banners?  
Live entertainment, music, DJ, etc.?  

*All items must be clearly represented on the event layout/site plan.  
**If City staff or equipment is requested, charges will apply.

5. Will alcohol be served/distributed? ______  
Will alcohol be sold? ______  

6. Liability Insurance Information - sponsor is required to have  
Liability Insurer:  _______________________________________________  
Policy Number:  _______________________________________________  
*Attach copy.  

I hereby certify that I have read and examined this application and know the same to be true and correct. The granting of a temporary event permit does not presume to give authority to violate or cancel the provisions of any state or local law regulating amusement events and similar functions. It is at the discretion of the City to request additional information as needed on a case-by-case basis. This application is hereby made according to the laws and ordinances of the City of Stockbridge for a temporary event permit as described herein and shall be submitted with accompanying site plan information and, if granted, will confirm to all laws and ordinances regulating the same. It is unlawful to falsely represent, directly or by implication, that funds are being solicited on behalf of any person, form, corporation, association or organization. 

I agree to hold harmless and defend the City of Stockbridge against any claim for damages, compensation or otherwise on the part of me, or any other party, resulting from injury to me, or any other party, which might occur as a result of the event being held.  

Signature ______________________________ Date _______________  
Print name _______________________________  

CITY OF STOCKBRIDGE  

Received by: ______________________________ Date/Time: ______________________________  

Approved/Disapproved: ______________________________ Decision sent via email or phone.  
Comments:  

Fees required: $___________ Paid: $___________ Payment type: _______________  
Received by: ______________________________