City of Buchanan | 302 N Redbud Trail
269-695-3844 | Buchanan, MI 49107

Special Event Application Form

Important: Please fill out each item as completely as possible, to allow your application to be processed as quickly as possible, without unnecessary delays. Please return the completed, signed application, with any necessary attachments, to City Hall, 302 N Redbud Trail. Completed applications can also be sent to clerk@cityofbuchanan.com.

Special Events must be approved by the City Commission, which typically meets twice per month. We recommend submitting your application at least two months before your organization wishes to receive approval, to allow time to work through issues with the staff, and to allow for the possibility that the City Commission may still see issues that should be addressed before approval.

Applicant Information

Name of Special Event: _____

Sponsoring Organization (if applicable): _____

Mailing Address: _____

City/State/Zip: _____

Contact Person(s): _____

Phone: _____ Email: _____

Event Information

*A separate event schedule and/or description may be attached in response to questions 1 through 4.

**For any question, if there is not room to include a complete response, please include the response on a separate attachment and note "see attached". When providing information in an attachment, please refer to the appropriate question number(s) to help the City staff review the application.

1. **What is the requested day(s), date(s), and time(s) of the Special Event?:**

_____

2. **Is there a requested alternative date(s)?** YES: _____ No: _____

   If YES, please provide the alternative date(s): _____

3. **Please describe the Event:**

_____

_____

4. **What is the requested location(s) of the Event:**

_____

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Please complete the following check list regarding your event and special needs: More detailed instructions are included on the following pages. Please use additional sheets where appropriate for more detailed responses. * Indicates attachments required

1. Is this event expected to occur again in a future calendar year? Yes _____ No _____

   Normal annual date: _____

2. Have you included a map indicating the location of your event? * Yes _____ No _____
3. Does the applicant wish to prohibit vending within the event area? Yes _____ No _____
4. Does the applicant plan to include vending as part of this event? * Yes _____ No _____
5. Will this event include the use of signs? Yes _____ No _____
6. Is the applicant providing special parking arrangements, such as reserved parking? * Yes _____ No _____
   Yes _____ No _____
7. Is the applicant requiring utility connections, such as electric? Yes _____ No _____
8. Does the applicant require other public services? Yes _____ No _____
   - Barricades/fencing Yes _____ No _____
   - Street Sweeping Yes _____ No _____
   - Mowing Yes _____ No _____
   - Rubbish Containers Yes _____ No _____
   - Picnic Tables Yes _____ No _____
   - Cessation of Lawn Sprinkling Yes _____ No _____
   - Other _____ Yes _____ No _____
   - Map included indicating locations of these services?* Yes _____ No _____
9. Does the applicant have any special security of safety concerns? Yes _____ No _____
10. Are you requesting assistance from the Public Safety? Yes _____ No _____
11. Are you requesting security/safety assistance form an outside agency? Yes _____ No _____
12. Will the event include loud or unusual sounds? Yes _____ No _____
    - Musicians/Amplified Announcers Yes _____ No _____
    - Carnival Rides/ Motor Vehicle Noises Yes _____ No _____
    - Other _____ Yes _____ No _____
13. Will the event include unusual lighting beyond what is normal at that location? Yes _____ No _____
14. Are alcoholic beverages proposed to be served as part of the event? Yes _____ No _____

    Have all necessary liquor licenses been obtained at the time of this application? Yes _____ No _____
15. Does the applicant have any other requests that are not listed in this form? Yes _____ No _____
16. The applicant is required to provide $1,000,000 of liability insurance coverage with respect to the event; have you attached a Certificate of Insurance listing the City of Buchanan as an additional named insures? Yes _____ No _____

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1. Is this event expected to occur again in a future calendar year? You may ask to reserve a date for a future calendar year with this application. To reserve an event date for a future calendar year, please provide the normal annual event date. Note: Granting such a reservation does not constitute final approval of the event, but will reserve the same area as granted for the current year, until three months before the reserved date.

2. An Event Map — If your event will use streets or sidewalks or will use multiple locations, please attach one or more maps showing the locations requested. Please show any streets or parking lots that you are asking be blocked off or reserved for specific purposes, locations of specific events or objects (carnival rides, bleachers, medical care, exhibits, special parking, pick-up/drop-off areas, etc.), remote parking lots, the actual route of a parade or race, and similar information appropriate to clarify the exact request.

3. Does the applicant wish to prohibit vending within the event area? Vendors with current permits to operate within the event area are allowed to continue vending at their normal location even within the event area, unless alternate arrangements are agreed to by the vendor and by the City Commission as part of this application. Please note these arrangements, if requested. However, if the application is approved, the City Commission would not approve additional vendors.

4. If vending is not prohibited, does the applicant wish to have control of vending within the festival area? In some instances, the applicant may be granted control of vending, the applicant is solely responsible for ensuring that all vendors are properly licensed with any appropriate agencies. If vending is not prohibited but the applicant does not wish to have the responsibility of controlling vendors, please direct any potential vendors to contact the City Clerk's Office to apply for the appropriate vending permit.

5. Will this event include the use of signs? If yes, please attach information on the size, content, and location of any requested signs; signs may be shown on the event map or on a separate map, if appropriate. Small directional signs that do not obstruct pedestrian or vehicular traffic may be placed in the event area, during the event, without being included in this application.

6. Is the applicant requesting special parking arrangements — such as limiting parking areas to certain groups of users? If yes, you must coordinate with the Police Chief.

7. Is the applicant requiring utility connections, such as electric service or water? If yes, you must coordinate with the Director of Public Services to review what utilities are available in the requested area and provide a description or map showing the utilities requested.

8. Does the applicant have any other requests for public services, such as street sweeping, mowing, rubbish containers or removal, placement or removal or picnic tables or other fixtures, or cessation of lawn sprinkling? If yes, you must coordinate with the Director of Public Services to determine if assistance from Public Services is appropriate and available and provide a description of the services Public Services has indicated it could provide. The applicant may be charged for these services.

9. Does the applicant have any special security or safety concerns? Is the applicant requesting assistance from the Department of Public Safety in addressing these concerns? If yes, you must contact the Director of Public Safety to determine what assistance from Public Safety is appropriate and available and provide a description of the services Public Safety has indicated it could provide. The applicant may be charged for these services.

10. Is the applicant requesting assistance from an outside agency or contractor in addressing these concerns? If yes, you must please attach information indicating all of these contractors on this application.

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11. Will the event include loud or unusual sounds, such as a musicians, singers, amplified announcers, carnival rides, motor vehicle noises beyond those regularly present in the location, etc.? If yes, you must please attach information indicating all of these on this application.

12. Will the event include unusual lighting beyond that regularly present in the location that could have an impact upon occupants of neighboring properties? If yes, you must please attach information indicating all of the types of lighting, the location, the beginning and end times, and whether the lighting is constant or intermittent during those times.

12. Are alcoholic beverages proposed to be served as part of the event? If yes, you must advise the Department of Public Safety of your intention to serve alcoholic beverages. Approval of the special event does not constitute final approval of service of alcoholic beverages; any necessary approval of a liquor license is a separate process. You must have any and all necessary liquor licenses been obtained at the time of this application.

13. Please attach a separate sheet detailing any aspects of the event that are not specifically addressed in this form but of which the City Commission should be aware to make a fully informed decision with regard to approval of the proposed event.

14. The applicant is required to provide a minimum of $1,000,000 of general liability insurance coverage with respect to the event. The City may require additional insurance coverage based on the potential risk and nature of the event. A Certificate of Insurance with the City of Buchanan listed as additional insured must be provided one month before the event. Additional Insureds include the following: The City of Buchanan, all elected and appointed officials, all employees and volunteers, agents, all boards, commissions, and/or authorities and board members, including employees and volunteers thereof. It is understood and agreed by naming the City of Buchanan as additional insured, coverage afforded is considered to be primary and any other insurance the City of Buchanan may have in effect shall be considered secondary and/or excess. Please email a copy to clerk@cityofbuchanan.com, attach below or mail to 302 N Redbud Trail, Buchanan MI 49107.

15. Will the event be requesting a street closure? If yes, please attach your street closure request form with this application.

The City of Buchanan PROHIBITS any and all painting of any city property, including sidewalks and streets. Events of those persons violating this policy will be canceled and no future event will be allowed.

Applicant Signature

I hereby affirm that the information is true to the best of my knowledge and belief, and agree that the applicant will be responsible for making certain that the event follows the ordinances, rules and regulations of the City of Buchanan, and that the event takes place in accordance with the application as approved by the Buchanan City Commission, including any conditions placed thereon.

_____

Printed Name: _____ Date:_____