

CITY OF ATHENS ALABAMA
APPLICATION FOR PERMIT FOR PARADE, PROCESSION OR PUBLIC DEMONSTRATION
ALL APPLICATIONS MUST BE SUBMITTED AND APPROVED PRIOR TO YOUR EVENT

Application Date _____ Date Received _____

Name of Organization _____

Address of Organization _____

Non Profit Yes ___ No ___

Primary Organizer _____

Contact Cell Phone _____ Home Phone _____ Work Phone _____

Address of Organizer _____

Email _____ Fax _____ Date of Birth _____

Event Website Address _____

Event Category:

___ Assembly/Rally ___ Race/Run* ___ Parade* ___ Other

___ Block Party* ___ Performance ___ Concert Car Show

___ Film/Photography ___ Festival ___ Protest/Picket * Map Required

If other list here: _____

Name of the Event: _____

Event Location:

Include assembly point, route of parade or procession, disassembly point and all other pertinent information.

Date(s) of the event _____

Event operating hours _____

Estimated attendance total and each day _____

Estimated number of vehicles involved in this event _____

Set-up date(s) _____ Set-up time(s) _____

Tear down date(s) _____ Tear down Time(s) _____

Primary on-Sight Contact Name _____ Cell Phone _____

Secondary on-sight Name _____ Cell Phone _____

Describe the Event:

Public Works

Will street(s) be closed? Yes _____ No _____

Will Sidewalk(s) be closed? Yes _____ No _____

Will parking places need to be blocked? Yes _____ No _____

Will the event have handicap parking? Yes _____ No _____

Will the event require use of the City of Athens owned barricades? Yes _____ No _____

Will any tents or canopies be used at the event? Yes _____ No _____

If yes how many? _____

List the sizes(s)

If yes include a map of the requested location of the tent(s)

Name of company, phone number and address providing tents or canopies:

Will the tent(s) be open or closed?

How will the tent(s) be secured to the ground? _____

Have you or the company providing the tent(s) contacted the City of Athens Street Department?

Have you or the company providing the tent contacted 811 for underground locates?

If yes when was 811 contacted? _____

Will waste receptacles be needed?

Yes _____ No _____

Comments _____

Will reciable receptacles be needed?

Comments _____

Have you contacted The City Of Athens Sanitation Department?

Yes _____ No _____

Will portable restrooms be required?

Yes _____ No _____

If yes

How many _____ Installation Date _____ Removal Date _____

Name of company providing portable restrooms: _____

Location portable

restroom(s): _____

Will the event require any type of stage or platform?

Yes _____ No _____

Describe if yes (Type Structure, Size, Location)

Company providing stage or platform, phone number and address:

Utilities

Does your event require electricity? Yes _____ No _____

Source: generator or existing power _____

Have you contacted Athens Utilities? Yes _____ No _____

Name, address and phone number of responsible contact for Athens Utilities

Fire Department

Do you plan on having any open flames? Yes _____ No _____

Will fireworks be part of your event? Yes _____ No _____

Will your event have any grills? Yes _____ No _____

Will your event have heaters of any kind? Yes _____ NO _____

Parks and Recreation Department

Will the event be in a City of Athens park or recreation facility? Yes _____ No _____

If yes, have you contacted City of Athens Parks and Recreation Department and obtained permission to have the event? Yes _____ No _____

City Clerk (Taxes and Licenses)

Have you contacted the City Clerk's office? Yes _____ No _____

Will food or drink be sold at the event? Yes _____ No _____

If yes please describe: (List who will be supplying the food and drink.)

Will the event include vendors? (Arts, crafts, clothing or other items) Yes _____ No _____

If yes describe here:

Will alcohol be sold, traded, dispensed or consumed at this event? Yes ____ No ____
If yes describe here:

If yes, have you obtained the appropriate licensing prescribed by law? Yes ____ No ____

Will food trucks be part of this event? Yes ____ No ____

General

Is the event covered by liability insurance? Yes ____ No ____

Will admission be charged to attend the event? Yes ____ No ____

List the ultimate use of net proceeds from the special event and whether any event proceeds will inure to the benefit of any person organizing, holding or promoting the event

What are your provisions for cleaning up after the event?

Does your event include any additional lighting, lasers or pyrotechnics? Yes ____ No ____
If yes describe here:

List the name of company phone number and address providing additional lighting, lasers or pyrotechnics:

Will there be advertisement including signs or banners for the event? Yes ____ No ____

Are animals part of the event?
If yes, how many and what kind?

Yes _____ No _____

Will your event include any amplified music/speaking or other excessive noise? Yes _____ No _____
If yes describe here, include times this equipment will be used:

What are your provisions, if any, for security, traffic control and/or crowd control?

Have you contacted the Limestone County Health Department?

Yes _____ NO _____

Are there any other special circumstances which are pertinent to this application?

I Understand that filing an application for a parade, procession or other public demonstration is not a guarantee that my request will be approved. I certify that all of the information contained in this application is true and correct to the best of my knowledge. I understand the permit , if granted is not transferable and is revocable at any time by the City of Athens.

If your application is approved you may pick it up Monday through Friday between 8:00 am and 4:30 pm.
FAILURE TO HAVE YOUR PERMIT WILL VOID YOUR EVENT PERMIT.

Name of Applicant _____

Signature _____ Date _____

