

AMHERST COUNTY



**AMHERST COUNTY
EVENT APPLICATION FORM**

**RETURN COMPLETED APPLICATION TO
AMHERST COUNTY RECREATION & TOURISM DEPARTMENT
129 Francis Ave., Monroe, VA 24574**

1. **Event Name:** _____
2. **Organization/Sponsor name:** _____
3. **Address:** _____
4. **Telephone:** _____
5. **Contact:** _____
6. **Purpose of event:** _____
7. **Dates/Hours of event:** _____
8. **Dates/Hours of set-up and clean-up operations:** _____

9. **Specific location of event/site plan (attach map):** _____

10. **List any streets that may be closed:** _____
 - 10a. **Identify specific dates/times of closure:** _____
 - 10b. **Identify specific dates/times of re-opening:** _____
11. **Tickets for event (attach copy):** _____
 - 11a. **Total number of tickets for sale:** _____
12. **Projected number of attendees:** _____
 - 12a. **Basis for projection:** _____
13. **Identify any temporary structures that will be constructed:** _____

- 13a. **Describe temporary structures in detail, identifying where they will be located:**

14. Will there be any hanging decorations or banners? _____

14a. If yes, identify location and how they will be hung/secured: _____

15. Will there be any music/entertainment? _____

15a. If yes, name groups, identify performance times, and indicate where they will perform: _____

16. Will additional utility services such as power and water be needed beyond what is currently in the area? _____

16a. Describe in detail the utilities that are needed and where they are to be located: _____

17. Is a Parade planned? _____

17a. Identify the parade route, start/stop time, and anticipated crowd size: _____

18. Are any street vendors being planned? _____

18a. Identify quantity, type and location of vendors: _____

19. Are food sales planned? _____

19a. Identify type, location, and quantity: _____

20. Describe in detail trash removal and clean-up plan: _____

21. Plan for providing necessary security: (Attach letter from Sheriff) _____

22. Plan for providing necessary medical services (Attach letter from Public Safety and Rescue Squad): _____

23. Plan for fire protection (Attach letter from Fire Department): _____

24. Identify parking needs and state if additional off-site parking with shuttles will be used:

25. Will existing restroom facilities be adequate? _____

25a. If not identify what method will be used to supplement: _____

26. Will alcoholic beverages be sold or permitted on site? _____

26a. Identify vendors and type of alcohol to be sold: _____

26b. Identify times/location in which alcoholic beverages will be sold: _____

26c. Identify what controls will be in place for restricting sale/consumption of alcoholic beverages of to/by minors: _____

27. How will the event be publicized? _____

28. Will there be a firework display? _____

28a. If so, identify the date, time, location and vendor: _____

29. Will any outdoor lights or lighting be utilized? _____

29a. If so, provide a plan showing the location of such lights and shielding devices or other equipment to prevent unreasonable glow beyond the property on which the festival is located and the same shall comply with the Uniform Statewide Building code: _____

AMHERST COUNTY EVENT PERMIT

NAME OF EVENT: _____

DATE OF EVENT: _____ TIME: _____

LOCATION OF EVENT: _____

APPLICANT'S SIGNATURE _____ DATE: _____

ADDRESS: _____

CITY, STATE, ZIP : _____

EMAIL: _____

TELEPHONE: DAY: _____ EVENING: _____

APPROVED: _____ DENIED: _____

APPROVED SUBJECT TO THE FOLLOWING MODIFICATIONS: _____



AUTHORIZED SIGNATURE: _____

DATE: _____