CITY OF SPRING HILL SPECIAL EVENT APPLICATION

PERMIT # _____

Application Date: _____ Event Date: _____

Street Closure Required: **Yes / No** **IF yes, *Street Closure Permit* must be attached.**

FEES REQUIRED:

Permit Review Fee: **$20.00**

Deposit/Bond Required - *Determined by City Adminisrator:*
Amount: $ _____

EVENT DETAILS:

NAME OF EVENT: _____

Applicant/Organization: _____

** Organization shall provide Certificate of Insurance, no less than $250,000.* **Copy Attached :** _____

*** Provide copy of business license.* **Copy Attached:** _____

Representative Name & Contact Information: PH# _____ EMAIL _____

_____

(Street) (City) (State) (Zip)

Event Location: _____

Time event will begin: _____ Time event will end: _____

Time & place event will: assemble_____ Disassemble:_____

Upon signing this application, the applicants shall agree to assume the defense of and indemnify and save harmless the city, its aldermen, boards, commissions, officers, employees and agents, from all suits, actions, damages or claims to which the city may be subjected of any kind or nature whatsoever resulting from, caused by, arising out of or as a consequence of special event and the activites permitted in connection therewith.

_____ _____

Print Name of Event Applicant Signature

Notes/Instructions
_____ _____
CITY ADMINISTRATOR APPROVAL **DATE**
_____
PERMIT ISSUED **DATE**