



CITY OF FLEMINGTON EVENT/ASSEMBLY PERMIT REQUEST

Check One: Parade Assembly 5K Other

(Must be submitted to the Sheriff's Department at least 230 days prior to the event)

Date Received: _____

Name and type of event (purpose) _____

Section A. INDIVIDUAL APPLICANT INFORMATION

Name _____ Sex _____ Date of Birth _____

Daytime Phone # _____ Mobile Phone # _____

Address: _____

Section B. ORGANIZATION APPLICANT INFORMATION

Organization Name: _____

Description of Organization:

Organization Address: _____

Name of representative completing application: _____ Title: _____

Daytime Phone Number: _____ Mobile Phone Number: _____

Section C. EVENT PLAN (Attach additional pages if needed)

1. Anticipated number of Participants _____

2. Event date(s): _____

3. Event hours: _____

4. Will this event involve food being served/sold? Yes: _____ No: _____



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Section C. Continued

5. Will there be a cost to attend: Yes: _____ No: _____

6. Will this event involve alcohol being served/sold? Yes: _____ No: _____

7. Event location: _____

Event route (attach map): _____

8. Will sound amplification be used? Yes: _____ No: _____

9. Will artificial lighting be used: Yes: _____ No: _____

10. Will structures be constructed or employed: Yes: _____ No: _____

11. Will vehicles be employed: Yes: _____ No: _____
If yes, include a detailed description.

12. Describe the safety, police, medical, sanitation and other personnel or equipment required. Include numbers, locations and times such personnel and equipment will be needed:

13. Describe the provisions necessary to the safety and welfare of the event participants and of the general public in both the area where your event will take place and on the routes to and from your event:

14. Will your event require changes to the normal/customary use of public spaces or facilities? Y _____ N _____

a. Will your event require changes to the routes to and from your event? Y _____ N _____

b. Will your event limit the use of and access to the event location by other private or public users? Y _____ N _____

Please give a detailed description of any "yes" responses:

Will a sign be handheld or fixed? Handheld: _____ Fixed: _____



Section D.

APPLICANT/ORGANIZATION DISCLOSURES

(Attach additional pages as needed)

1. Have you previously conducted or participated in an event of a substantially similar nature to the present event: If “yes, detail date(s), location(s), and whether or not the applicant or organization came under any legal action (civil, criminal, or administrative).

2. Have you or the organization defaulted upon or are in arrears as to any civil, criminal, or administrative judgement? Prove an Explanation of the non-compliance, judgement, or order.



This event permit will be heard by Flemington Mayor and Council

DATE	TIME	LOCATION
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LCPC Recommendation: _____

Mayor and City Council final action:

APPROVED _____ DISAPPROVED ___ APPROVED W/COND.

City Clerk _____
Signature

Date