

Special Event Application – Town of Chapel Hill Community Arts & Culture

Today's Date \_\_\_\_\_

Name of Organization \_\_\_\_\_

Primary Organizer Contact \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Email Address \_\_\_\_\_

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Primary Event Category:

\_\_\_\_\_ Assembly/Rally      \_\_\_\_\_ Race/Run/Walk      \_\_\_\_\_ Festival      \_\_\_\_\_ Concert  
\_\_\_\_\_ Block Party      \_\_\_\_\_ Performance      \_\_\_\_\_ Education      \_\_\_\_\_ Parade  
\_\_\_\_\_ Filming/Photography      \_\_\_\_\_ Other: \_\_\_\_\_

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Name of Event \_\_\_\_\_

Location(s) of Event \_\_\_\_\_

Date(s) of Event \_\_\_\_\_ Estimated Attendance \_\_\_\_\_

Event Times (opening) \_\_\_\_\_ AM/PM      (closing) \_\_\_\_\_ AM/PM

Setup Times \_\_\_\_\_ AM/PM to \_\_\_\_\_ AM/PM      Take Down Times \_\_\_\_\_ AM/PM to \_\_\_\_\_ AM/PM

Primary On-Site Contact \_\_\_\_\_ Cell \_\_\_\_\_

Mission/Purpose of Event \_\_\_\_\_

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Describe Event \_\_\_\_\_

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Please provide a map showing the layout/route of your event and all event structures and equipment on-site (e.g. tents, stage, generator, inflatables, restrooms, etc.)

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|---|--------------------|
| Will streets/sidewalks need to be closed?                     | Yes _____ No _____ |
| Will parking spaces need to be closed?                        | Yes _____ No _____ |
| Will any vehicles/trailers need to be located at the event?   | Yes _____ No _____ |
| Will alcohol be served/sold at the event?                     | Yes _____ No _____ |
| Are sales/vendors being planned?                              | Yes _____ No _____ |
| Are fireworks planned for the event?                          | Yes _____ No _____ |
| Will animals be on site during this event?                    | Yes _____ No _____ |
| Will tents be used for this event?<br>If so, what size? _____ | Yes _____ No _____ |
| Will banners or signs be used at the event?                   | Yes _____ No _____ |
| Does your event require electricity?                          | Yes _____ No _____ |
| Will sound amplification be used at the event?                | Yes _____ No _____ |
| Will there be any cooking with grease?                        | Yes _____ No _____ |
| Will an open flame/grills be used for cooking?                | Yes _____ No _____ |
| Will additional trash receptacles be needed?                  | Yes _____ No _____ |
| Will portable toilets be on-site?                             | Yes _____ No _____ |
| Will the event be advertised?                                 | Yes _____ No _____ |

If the date and/or location requested is not available, or if the requested location is not an appropriate site to conduct your proposed event, the department will contact you and an alternate location will be suggested if available. Your confirmation will be in the form of a permit, issued to the organization and/or person responsible for the event. **Do not publicize your event until the approval of your Special Event Application has been confirmed. Submitting a Special Event Application is NOT approval to hold your planned event.**

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Please place a check mark next to all items needed to complete this application:

- |   |  |
|---|--|
| <input type="checkbox"/> Special Event Application              | <input type="checkbox"/> Site Plan or Route Map                        |
| <input type="checkbox"/> Event Permit/Streets or Parking Lots   | <input type="checkbox"/> Fire Permit Application                       |
| <input type="checkbox"/> Parade/Run/Walk Application            | <input type="checkbox"/> Street/Lane/Sidewalk Closure                  |
| <input type="checkbox"/> Specialty Market Permit (\$200)        | <input type="checkbox"/> Electrical Generators in Use                  |
| <input type="checkbox"/> Emergency Planning Form or Action Plan | <input type="checkbox"/> Food Vending TFE Permit                       |
| <input type="checkbox"/> Liability Insurance Certificate        | <input type="checkbox"/> Food/Merchandise Business License Application |
| <input type="checkbox"/> Parks/Facility Rental Form             | <input type="checkbox"/> Noise Permit (\$50)                           |

Everything that I have stated on this application is correct to the best of my knowledge. I have read, understand, and agree to abide by the polices, rules, and regulations listed within the accompanying *Outdoor Special Event Rules and Requirements* as applicable to all plans and requested usage. The permit, if granted, is not transferable and is revocable at any time at the absolute discretion of the Executive Director of Community Arts & Culture, Town of Chapel Hill, NC.

Name of Applicant (Print) \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

Paperwork should be returned to Community Arts & Culture

[artsandculture@townofchapelhill.org](mailto:artsandculture@townofchapelhill.org)

100 Library Drive, Chapel Hill, NC 27514