



Special Event Permit Application

CITY OF LONG LAKE

450 Virginia Avenue, PO Box 606

Long Lake, MN 55356

Phone / 952.473.6961

FOR OFFICE USE ONLY

Amount Due: \$ N/A

Date Paid: _____

☐ Check # _____

☐ Credit Card

☐ Cash Receipt # _____

Deposit Required?

☐ Yes, Check # _____

☐ No

- **REVIEW PAGE 3 for the Special Event Permit application fee schedule and application submittal checklist.**

- Complete this permit application form and submit to City Hall **at least 45 days prior to the event start date.** Permit application must be accompanied by all exhibits requested to be considered complete.

Event Name 2024 City of Long Lake Tree Lighting Celebration

Describe Location or Area of City Where Event Will Take Place Holbrook Park

of Participants Expected to Attend Event ~50-75

Describe Any Participation/Entry Fees to be Charged N/A

Event Dates/Times Proposed

** List all Event Dates/Times Below **			
Day of Week	Date	Start Time	End Time
Friday	12/6/24	5:30 PM	7:30 PM

Event Type (CHECK ALL THAT APPLY)

☐ Parade ☐ Festival ☐ Run/Walk ☐ Sporting Event ☐ Block Party ☐ Private Party
☒ Other, Explain Free City-sponsored community outdoor gathering to light a holiday tree and share hot chocolate around bonfires

Event Includes (CHECK ALL THAT APPLY)

☐ Liquor Service ☒ Food Service ☐ Bingo/Raffles ☐ Live Music ☐ Amplified Audio
☐ Animals ☐ Pedestrians/Runners ☐ Bicycles ☐ Floats ☐ Motor Vehicles, # Expected _____
☐ Other Vehicles, Explain _____
☐ Games, Amusement Devices or Carnival Equipment, Describe _____

Will Parking for Event Exceed On Site Parking Facilities Available?

☐ Yes, WRITTEN PERMISSION FROM AREA PROPERTY OWNERS ALLOWING USE OF THEIR PROPERTY FOR PARKING IS ATTACHED
☒ No

Traffic Control Personnel Provided by Whom Not required. All vehicles will park in designated spaces onsite

Delineation Equipment (Barricades, Signs, Traffic Cones, No Parking Signs, etc.) Provided by Whom N/A

Street(s) to be Closed (A MAP SHOWING THE SPECIFIC ROUTE OR AREA TO BE CLOSED **MUST BE ATTACHED**)

N/A

Site Map and Detailed Description of Event Required

A DETAILED SITE MAP OF THE EVENT AREA AND DETAILED EVENT DESCRIPTION NARRATIVE MUST BOTH BE ATTACHED TO THIS APPLICATION. The Site Map should show locations of food and beverage vendors (noting controlled entry to any alcoholic beverage service areas), where activities will be taking place, and where any temporary infrastructure such as tents or bandstand facilities will be installed.

Insurance Carrier for Event

A Certificate of Insurance naming the City of Long Lake as an additional insured **must be submitted at least 10 days prior to the event start date.** Amount of insurance required is \$1,000,000.

Name of Insurance Carrier City-sponsored event Policy Number _____

Chairperson, Event Manager, or Director (Person Responsible for Duties of Permit Holder)

Full Name Erika Leachman Daytime Phone 805-252-9891

Alternate Phone _____ Email Address erikaleachman@gmail.com

Street Address 178 Glenmoor Lane

City, State, Zip Long Lake, MN 55356

Organization Information

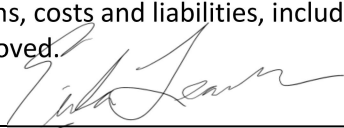
Organization Name City of Long Lake Park Board

Mailing Address 450 Virginia Avenue

City, State, Zip Long Lake, MN 55356

Phone 952-473-6961 Fax _____

By signature below, applicant/event organizer agrees to abide by any and all conditions of Special Event Permit approval, if approved; and hereby agrees to indemnify, hold harmless, and exempt the City of Long Lake, its officers, employees, and agents from any and all claims, costs and liabilities, including reasonable attorneys' fees, in any way related to the applicant's Special Event as approved.

X Signature of Applicant  **Date** October 31, 2024

****** FOR CITY USE ONLY ******

APPLICATION SUBMITTED WAS: ☒ Complete With Exhibits ☐ Incomplete – Date Completed _____

Review by Department Head or Designee

OK ☐ Public Works Reviewed By _____ Date _____

OK ☐ Fire Department Reviewed By _____ Date _____

OK ☐ Police Department Reviewed By _____ Date _____

Special Event Permit Approved By _____ (CITY CLERK OR AUTHORIZED DESIGNEE)

Date Approved _____ **PERMIT #** S2024-09

Conditions of Permit Approval

☒ Permit Conditions Detailed in Attached Letter Dated 11/7/2024

☐ Permit Conditions Listed Below:
