

TOWN OF SYLVA

Parks and Recreation Department
83 Allen Street Sylva, N.C. 28779

Phone: (828) 586-2719 Fax: (828) 586-8134 E-mail: townclerk@townofsylva.org

BRIDGE PARK PAVILION/OUTDOOR SPECIAL EVENT PERMIT APPLICATION

**Your event date is NOT reserved until all required paperwork and payments are received.

EVENT Date 9.19.2026

Today's Date 2.20.2026

Name of Organization JACKSON COUNTY FARMERS MARKET Phone# 843.730.7103

Primary Organizer Contact:

Name Sarah Rehmman Event Day Phone# 616.217.6744

Address 434 WALNUT COVE RD

Email Address colloweegeefarms@gmail

Primary Event Category:

Note 60-Day Advance Notice is Required for Events that will need a Road Closure!!

- Assembly/Rally Race/Run/Walk Festival
Concert Block Party Performance
Educational Filming/Photography X Other: FUND RAISER

Name of Event SALSA SHOWDOWN

Mission/Purpose of Event FUND RAISER Estimated # Attending 250-300
(determines if police presence will be required at the applicant's expense)

Reservation Time(s) Opening 1 AM/PM Closing 9 AM/PM
(be sure to include set-up and clean-up in your reservation time)

Primary On-Site Contact SARAH REHMANN DOUG DEGOOD Mobile Phone# 616.217.6744 843.730.7103

Describe Event FUND RAISER FEATURING SALSA TASTING CONTEST, LIVE MUSIC, FOOD + VENDORS

List quantity of structures & equipment on-site (Ex. Tents; Stakes; Generators; Inflatables, etc.)

TENTS

- Will streets/sidewalks need to be closed? Yes ___ No X
- Will any vehicles/trailers be located in non-parking areas? Yes ___ No X
- Are sales by private vendors being planned? Yes X No ___ IF YES, how many? _____
- Will tents or canopies be used at the event? Yes X No ___
- Will banners or signs be used outside the event area? Yes ___ No X
- Does your event require electricity? Yes X No ___
- Will sound amplification be used? Yes X No ___
- Will there be any cooking with grease? Yes ___ No X
- Will private grills be in use for food preparation? Yes ___ No X
- Will additional trash receptacles be used? Yes X No ___
- Will the event be publicized? Yes X No ___
- Will you be using inflatables? Yes ___ No X IF YES, please attach certificate of liability insurance.
- Do you want to request town approval to serve alcohol? Yes X No ___

What type of alcohol do you intend to serve? BEER By Whom? IPNO
 (If YES, attach a copy of the permit holder's NC Off-Premise license to sell alcohol and certificate of liability insurance coverage at a level of \$1,000,000, listing the Town of Sylva for the day of the event.)

****ALCOHOL USE IS STRICTLY PROHIBITED ON PROPERTY OWNED OR OCCUPIED BY THE TOWN OF SYLVA** - ORDINANCE: ARTICLE I SEC 4-2 UNLESS APPROVED BY THE TOWN BOARD. DO NOT publicize your event until you have been granted approval.**

INITIAL FOR ACKNOWLEDGEMENT _____

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 suggested if available. Your confirmation will be in the form of a permit, issued to the organization and/or person responsible for planning the event. Do not publicize your event until preliminary approval has been confirmed by the Town of Sylva. The submission of an Outdoor Special Event Permit Application is NOT approval to hold an event.

Confetti is strictly prohibited.

List of Fees:

***NOTE: All fees must be paid before the reservation is approved.**

Park Reservation Fees

Vendor Fees

- ___ \$30.00 for two hours (Town Residents)
- ___ \$50.00 for two hours (non-Town Residents)
- ___ \$50.00 for four hours (Town Residents)
- ___ \$75.00 for four hours (non-Town Residents)
- ___ \$100.00 for eight hours (Town Residents)
- X \$125.00 for eight hours (non-Town Residents)

- X \$100 for up to 30 tent/table vendors
- X \$75 for up to six food vendors. Please List:

X \$25 for each alcohol vendor, Qty: _____

\$ 325⁰⁰ TOTAL for BOTH Columns

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 policies, rules, and regulations. The permit, if granted, is not transferable and is revocable at any time at the absolute discretion of the Sylva Town Manager.

Name of Applicant DOUG DEBOOD

Signature Doug DeGood Date 2.20.2026

OFFICIAL USE ONLY

- Certificate of Liability Insurance Coverage
- Copy of NC License to Sell Alcohol

Resolution Approval Date: _____

Town Official Approval _____ Date _____



Innovation Brewing LLC
Innovation Brewing
414-A West Main Street
Sylva, NC 28779

ISSUED: 08/01/2024
COUNTY: Jackson
TYPE: LLC Member Managed

PERMIT NUMBER	ORIGINALLY ISSUED	DESCRIPTION
00340279BM	08/01/2024	Brewery
00340279BW	08/01/2024	Malt Beverage Wholesaler
00340279DG	08/01/2024	Malt Beverage Special Event



FILE NUMBER:

00340279CM-999

Pursuant to G.S. 18B-903, these permit(s) are valid only for the business listed at this address, are not transferable, and will automatically expire with an ownership change. See authorization(s) on the back.

William Henry Bauer, Jr.
WILLIAM HENRY BAUER, JR.
Chairman