



City of Bristol  
Department Of Parks & Recreation  
111 North Main Street, 2<sup>nd</sup> Floor  
Bristol, Connecticut 06010  
860-584-6160

Special Event – Permit Application

Date: \_\_\_\_\_

Applicant Information

Name of contact:	
Street Address:	
City/State/Zip:	
Telephone Number:	
Alternate Telephone Number:	
Email address or web site:	

Event Information

Requested location:	
Requested date(s)/Time(s):	To:
From:	
Rain Date:	
Event Name:	
Event Sponsor/Purpose:	
<input type="checkbox"/> Non-Profit <input type="checkbox"/> For Profit	Entry Ticket Price:
Expected attendance:	
Where will attendees park?	
Number of vendors/booths:	

Please check all that apply:

- |  |                              |                             |
|--|------------------------------|-----------------------------|
| Will there be amplified entertainment                    | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Will there be items for sale                             | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Tents or Canopies  | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Open flames or cooking                                   | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Fireworks  | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Temporary fencing  | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| First Aid area   | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Portable toilets   | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Traffic Control Requested<br>(Additional fee will apply) | <input type="checkbox"/> Yes | <input type="checkbox"/> No |

**Police Chief may determine that Traffic Control is required even if not requested.**

- |                                 |                              |                             |
|---------------------------------|------------------------------|-----------------------------|
| Public Street closure requested | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
|---------------------------------|------------------------------|-----------------------------|

**Street:** \_\_\_\_\_

**Closure location**

**Beginning:** \_\_\_\_\_ **ending:** \_\_\_\_\_

Who will be responsible for security/safety at the event?

\_\_\_\_\_

- |                                    |                              |                             |
|------------------------------------|------------------------------|-----------------------------|
| Barricades needed to block traffic | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
|------------------------------------|------------------------------|-----------------------------|

Rubbish Disposal:

- Will provide own containers and disposal
- Request City of Bristol containers and disposal (additional fee may apply)

Alcoholic Beverages:

**No alcoholic beverages will be allowed for sale or consumed at the site of the event. The applicant agrees to publicize the no alcoholic beverages restriction in their event notices, tickets and site signage.**

Insurance Requirements:

To hold an event on City property - a minimum of \$1,000,000 combined single limit Bodily injury, property damage per occurrence and \$2,000,000 aggregate coverage. The City of Bristol must be named as additional insured. Copy Provided  Yes  No

- Name of Insurance Company:
- Policy Number:
- Effective Date(s):

**Hold Harmless Clause:**

*Applicant agrees to hold the City of Bristol harmless and will indemnify the City of Bristol for damages sustained as a result of an injury or property damage for which the City of Bristol may be held responsible, resulting from the event identified in the agreement for the use of City property. I will abide by all policies, rules, regulations and conditions of use as written. I understand that the special event permit is not transferable to any other individual or group.*

Signature of Applicant: \_\_\_\_\_

\*\*\*\*\* City Use Only \*\*\*\*\*

Superintendent of Parks and Recreation: \_\_\_\_\_  
Recommend approval / deny request

Public Works Director: \_\_\_\_\_  
Recommend approval / deny request

Police Department: \_\_\_\_\_  
Recommend approval / deny request  
Police Traffic Control is / is not required.

Fire Department: \_\_\_\_\_  
Recommend approval / deny request

Comptroller: \_\_\_\_\_ (Insurance Review)  
Recommend approval / deny request

City Council Real Estate Committee: \_\_\_\_\_

Approving Authority: \_\_\_\_\_

Approved                       Denied

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

Any Conditions of Approval: \_\_\_\_\_

Copies to:

Mayors Office

P.W. Dispatcher

Police Department

Fire Department

Comptroller

Applicant

File