**Town of Roanoke Special Events Application**

\*Town Use Only\*

**Application Sent a Request to: Amount Paid: Receipt No:**

Town Clerk Treasurer

**Payment Type: Check/Cash**

**Date Paid:**

**Date Application Received:**

This form is exclusively for Festivals, Concerts, Races, Walks, and similar special events within the town limits of Roanoke.

We are happy that you have chosen to plan a special event within the Town of Roanoke. A completed application must be filed at least 30 days prior to the first day of your event. Keep in mind that acceptance of your application should in no way be construed as final approval or confirmation of your request.

Note: If the Roanoke Town Council approved your application and you have requested street closures, it is your responsibility to notify the following of the details of the dates, times and streets that will be closed:

* Roanoke Police Department- *260-672-8116 Ext. 1*
* Roanoke Street Department- *260-672-8116 Ext. 4*
* Roanoke Fire Department- *260-672-2352*

**EVENT NAME\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**EVENT DATE(S)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**APPLICANT INFORMATION:**

Organization putting on event: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Applicant Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Title \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Mailing Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Applicant’s Contact Information: Office Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Cell Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

E-Mail: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Fax Number:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

On-Site Coordinator Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Cell Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**EVENT OPERATIONS:**

Event: \_\_\_\_ Festival \_\_\_\_ Concert \_\_\_\_ Car Show \_\_\_\_ Parade

\_\_\_\_ Race/Walk \_\_\_\_ Bike Race \_\_\_\_Other (please specify) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Anticipated attendance: \_\_\_\_\_\_\_\_\_ Specific area of City to be used for event: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Set Up Date: \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_ Hours: \_\_\_\_\_:\_\_\_\_\_ AM or PM to \_\_\_\_\_:\_\_\_\_\_\_ AM or PM

**Public Bathrooms:** **Yes** or **No**

**Event Description:** Please attach a narrative detailing all the activities that are going to be part of the event.

**Use of Town Water Service:** Available only at limited locations. Applicant must contact the Roanoke Superintendent of Operations to determine if water service is available.

**Use of Town Police Dept:** Does not include Town of Roanoke Police department services. You must contact the Town of Roanoke Police Department separately if services are needed.

**Street Closures:** If your event will require street closure, you must contact the Roanoke Police Department (260-672-8116 Ext. 1); Roanoke Fire Department (260-672-2352); and Roanoke Superintendent of Operations (260-672-8116 Ext. 4) for arrangements to be discussed. Each must approve and communicate that approval to the Roanoke Town Council at the next meeting at which your completed application is considered.

**Use of Town Electric Service:** Available only at limited locations. Applicant must contact the Roanoke Superintendent of Operations to determine if electric service is available.

**Fees**: The one-time, non-refundable application fee per event is:

Non-Profit Organizations - $100. (for events with street closures only)

All Other Organizations - $250. (for events with street closures only)

Note: The application fee will be waived for Town of Roanoke community-wide events (e.g., Roanoke Fall Festival).

**Clean-up/Litter Management:** You are responsible for all litter, grease, ash, and gray water generated by your event. Arrangements should be made with a private power-washing contractor to remove all stains left by your event. If clean-up is not done and gets completed by the Town of Roanoke, you will be billed separately. Spray painting of any kind is prohibited.

**Additional Permits - IDHS Amusement & Entertainment Permit:** Your event may require a separate permit from the State of Indiana. You should determine the need for such and obtain a permit if applicable. Visit: <http://www.in.gov/dhs/2795.htm> for more information.

**ALCOHOL:**

Will alcohol be served or sold? Yes \_\_\_ No \_\_\_

If Yes:

* The applicant must apply for and receive a temporary liquor license from the Alcohol & Tobacco

Commission.

* Application cannot be processed without a copy of this license.
* Events that will have alcohol sales must provide security. If your event will be hiring a security company, please provide its contact information in sub-section (a) below. Otherwise, please list the names, phone numbers, and qualifications (e.g., off-duty police officer, professional security guard, or event applicant) of three (3) security guards in the fields provided in sub-section (b).

(a) Security Company Information

Company Name:

Contact Name:

Contact Phone:

Email:

Address:

City/State/ZIP:

(b) Independent Security Information

Name:

Contact Phone:

Qualifications:

Name:

Contact Phone:

Qualifications:

Name:

Contact Phone:

Qualifications:

**MATERIALS/ACKNOWLEDGMENT/HOLD HARMLESS/SIGNATURE:**

1) In addition to completing the following application form, and paying any fees, applicant is required to submit an original Certificate of Insurance in an amount not less than one million dollars ($1,000,000) combined single bodily injury and property damage for each occurrence. If there is alcohol at the event, the Certificate of Insurance must also include one million dollars ($1,000,000) of liquor liability for each occurrence. Your insurance certificate should list as the Certificate Holder and Additional Insured with Primary/Non-Contributory – Other Insurance Condition and Waiver of Subrogation: Town of Roanoke, 141 W Third St., Roanoke, IN 46783.

\_\_\_\_ Certificate of Insurance

2) \_\_\_\_ Application Fee

3) \_\_\_\_ Event Site Map or Route Map

4) \_\_\_\_ Copy of Liquor License (if alcohol is being served and/or sold)

5) Approvals: Y\_\_\_ N\_\_\_ Fire Department

Y\_\_\_ N\_\_\_ Street Department

Y\_\_\_\_N\_\_\_ Police Department

6) The undersigned, individually and as the duly authorized representative of the organization referenced herein, on behalf of undersigned and that organization certify (1) that I am responsible to provide all information necessary to meet the conditions and requirements of the application process and that by providing such information it is no guarantee that my proposed event will be permitted by the Town of Roanoke; (2) indemnify and hold harmless the Town of Roanoke from any claims brought against it relating to the event and to meet all other conditions of the Town; (3) I have read and understand this application and the conditions under which my request will be considered; and (4) the risk of promoting an event before permission is granted is the sole responsibility of the applicant.

**Applicant’s Signature** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Date**\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Individually and as the duly authorized representative of the organization referenced herein

**Printed Name:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Return this application to:**

Roanoke Town Hall 141 W Third Street Roanoke, IN. 46783

Applications are processed in the order they are received typically at the next regular meeting of the Roanoke Town Council. The Council meets the first and third Tuesday of each month at the Roanoke Town Hall.

**Note: It is the responsibility of the applicant to contact the Town Clerk-Treasurer to have the application placed on the Town Council Agenda.**

**SITE/ROUTE MAP:**

**Event Site Map should include:**

* An outline of the entire event venue including names of all streets or areas that are part of the venue and the surrounding area. If the event is a parade/race, indicate the direction of travel.
* The location of all stages, fencing, barricades, scaffolding, tents, portable restrooms, booths, cooking areas, trash dumpsters, grease/ash containers, gray water containers, and other temporary units.