VILLAGE OF METAMORA
SPECIAL EVENT APPLICATION

DIRECTIONS: Complete this application and return it, and all necessary documents, to the Village Clerk's office a minimum of 60 days before the event.

APPLICANT INFO: PERSON, ORGANIZATION, OR BUSINESS SPONSORING EVENT

Name:_____ Phone #: _____

Address: _____

Contact person(s) on the day of the event:

Name(s): _____

Phone #: _____

EVENT INFO:

Name of the Event: _____

Date(s) of the event: _____

Description of the event: _____

Hours of the event: _____

Time of setup: _____ Time of cleanup: _____

Where will the event be held: (Including streets, parks, and parking lots. Please list the times of closures)

_____

_____

_____

Estimated Attendance:_____

Will bathrooms be provided? ____ YES ____ NO

Will this event obstruct any roadways or parking? ___ YES ___ NO

If the event is within the Village right-of-way/roadways, please provide a map of the route.

Will the Metamora Township Police Department be needed for traffic control? ____ YES ____ NO

CERTIFICATION AND SIGNATURE: I understand and agree on behalf of the sponsoring organization that:

1. A certificate of insurance must be provided, which names the Village of Metamora as an additional named insured party on the policy.
2. Event sponsors and participants will be required to sign an Indemnification Agreement.
3. If the event includes solicitation by workers standing in the street intersections, safety vests must be worn.
4. All food vendors must be approved by the Lapeer County Health Department.
5. The approval of this special event may include additional requirements and/or limitations based on the Village's review of this application.

As the authorized agent of the sponsoring organization, I hereby apply for approval of this Special Event Application, affirm the above understanding, and agree that my organization will comply with all terms and laws that may apply to this event.

Date:_____ Signature of Organization's Agent: _____

INDEMNIFICATION AGREEMENT

I agree to defend, indemnify, and hold harmless the Village of Metamora, Michigan, its officers, employees and agents, from and against any claim, demand, suit, loss, cost or expense, or any damage, which may be asserted, claimed or recovered against or from the Village of Metamora, its officers, employees, and agent, by reason of any damage to property, bodily injury or death, sustained by any person whomsoever and which damage, injury or death, arises out of or is incident to or in an way connected with or related to the special event.

Date:_____ Signature of Organization's Agent: _____

Submit this application at least **60** calendar days before the event to the Village of Metamora, Clerk's Office Office 48 E. High St, Metamora, MI 48455

Be sure to include the following with the application:

- Completed signed application
- Certificate of Insurance naming the Village of Metamora as additional named insured
- Signed Indemnification Agreement
- Event Map (including location of first aid, rest rooms, handicapped accessibility, trash, parade routes and street closures)

Received by the Village Clerk: _____ Date: _____

Approval by Village Council: _____ Date: _____

Additional requirements and/or limitations: