City of NORTHWOOD OHIO

SPECIAL EVENT APPLICATION

Primary Contact: _____ Organization: _____

Type of Organization (e.g. Not-for-Profit): _____

Street Address: _____ City/State/Zip Code: _____

Phone Number: _____ Email: _____

Secondary Contact: _____ Phone Number: _____

Request for (Check all that apply): _____ Special Event/Festival _____ Temporary Closing of street or alley

Type of Event: _____

Date(s) of Event: _____ Rain Date(s): _____ Location of Event: _____

Time of Event: _____ Set-Up Time: _____ Tear-Down Time: _____

Will alcohol be served pursuant to an approved permit? _____

Signature of Applicant: _____ Date: _____

Request Section 1

Request for use during event provided by REQUESTOR (Check all that apply):

_____ Street Closure	_____ Tents	_____ Grills/Fryers	_____ Electrical Taps
_____ Generators	_____ Barricades	_____ Dumpsters	_____ Lighting
_____ Vending	_____ Food Prep	_____ Portable Toilets	_____ Extension Cords
_____ Fire Extinguishers	_____ Fireworks	_____ Air Supported Structures	_____ Parking Control

Request Section 2

Request for use during event provided by the City (Check all that apply):

_____ Use of City Facility, Park or Property

_____ Safety Personnel for Security or Traffic/Parking

_____ Other (please describe): _____

***Please include a site plan indicating the locations of ALL items checked above. Please provide specific details for parking for patrons, participants, volunteers and spectators. Provide a detailed description of any requests for use during the event provided by the City.**

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For Office Use Only

Received by: _____ Date: _____

Comments:_____

_____

_____

☐ Approved ☐ Denied_____

This *Special Event Application* has been reviewed and **approved** or **denied** as requested.

_____ _____

City Administrator Chief of Police