



**City of Hendersonville
SPECIAL EVENT PERMIT
APPLICATION COVER PAGE AND CHECKLIST**



An application for a permit to conduct a special event pursuant to Section 28-39, Hendersonville City Code.
Please reference the City's Special Event Policy for additional information about the application process.

Note: The person responsible for the special event, or his/her designee, must be present for the duration of the event.

Name of Special Event: _____

Event Sponsor: _____ Phone #: _____

Sponsor Address: _____

Authorized Event Coordinator: _____

Cell Phone #: _____ Email: _____

Requested Event Date(s): _____ Requested Event Hours: _____

Estimated Past Attendance: _____ Predicted Attendance: _____

Past Vendor Participation: _____ Predicated Vendor Participation: _____

"Hold Harmless Agreement"

By signing this agreement, the sponsor will hold harmless the City of Hendersonville, its officers, employees and agents, the Public Works Department and staff free and harmless from and against any and all losses, penalties, damages, settlements, costs, charges professional and attorney's fee or other expenses or liabilities of every kind and character arising out of or relating to any and all claims, liens, demands, obligations, actions, proceedings or causes of action of every kind and character in connection with or arising directly or indirectly out of this event and/or the performance hereof and caused by the negligence of the Sponsor. The Sponsor will take full responsibility. The City of Hendersonville will not be responsible for personal items or property used as part of event.

Signature of Authorized Event Representative: _____ Date: _____

APPLICANT CHECKLIST

Please reference the City of Hendersonville's Special Event Policy for additional information about the requirements listed in the checklist below.

- Event Description, Statement of Public Benefit & Public Services Required (REQUIRED) - Page #2 in application
- Event Site Plan (REQUIRED) - Page #3 in application
- Event Marketing Strategy & Budget (REQUIRED) - Page #4 in application
- Vendor Application & Electrical Requirements Form (Complete as needed) Page #5 in application
- Street Closure/Sidewalk Impact Petition Form (Complete as needed) Pages #6 & 7 in application
- Event Insurance (REQUIRED)

Submit This Completed Application & All Supporting Material Outlined Above To:

Susan G. Frady, CFM, CZO Director, Development Assistant Department City of Hendersonville
100 N. King Street Hendersonville, NC 28792 Phone #: (828) 698-6185



**City of Hendersonville
SPECIAL EVENT PERMIT
EVENT DESCRIPTION, STATEMENT OF
PUBLIC BENEFIT AND PUBLIC SERVICES REQUIRED**



Please provide a detailed “Event Description” along with your “Statement of Public Benefit” and “Public Services Required” for review.
Please reference the City’s Special Event Policy for additional information about this application requirement.
Feel free to attach your response to this sheet.

Name of Special Event: _____

Event Description:

Statement of Public Benefit:

Public Services Required:



**City of Hendersonville
SPECIAL EVENT PERMIT
EVENT SITE PLAN**



Please provide a detailed "Event Site Plan."

Please reference the City's Special Event Policy - page 5 for additional information about this application requirement.

Feel free to attach your site plan to this sheet.

Name of Special Event: _____

Event Site Plan:



**City of Hendersonville
SPECIAL EVENT PERMIT
EVENT MARKETING STRATEGY AND BUDGET**



Please provide an "Event Marketing Strategy" along with your "Marketing Budget" for review.
Please reference the City's Special Event Policy - page 5 for additional information about this application.
Feel free to attach your response to this sheet.

Name of Special Event: _____

Event Marketing Strategy:

Marketing Budget:



**City of Hendersonville
SPECIAL EVENT PERMIT
VENDOR PERMITS AND ELECTRICAL REQUIREMENTS**



Complete the form below based on the number of vendors and types of electrical connections required for your event. If you have questions about the electrical requirements for your event please contact the City Public Works Department at (828) 697-3000.

Name of Special Event: _____

Authorized Vendor Coordinator: _____ Phone #: _____

Cell Phone #: _____ Email: _____

Please calculate your event vendor fees & electrical usage fees below.

Total # _____ of Retail Vendors X \$15 = _____

Total # _____ of Food Vendors X \$30 = _____

Total Vendor Fee Due: _____

Electrical Requirements: Location of electrical needs to be included on Event Site Plan.

((Total # of connections @ 20 Amps or less _____) x (# of days _____)) x \$25 = _____

((Total # of connections @ 21 to 50 Amps _____) x (# of days _____)) x \$50 = _____

((Total # of connections @ 50 Amps or more _____) x (# of days _____)) X \$100 = _____

Total Electrical Usage Fee: _____

Total of All Event Fees: _____



**City of Hendersonville
SPECIAL EVENT PERMIT
STREET CLOSURE/SIDEWALK IMPACT NOTIFICATION & PETITION
(FOR COMMERCIAL AREAS)**



NOTIFICATION: I hereby certify that all property owners, managers or lessees adjacent to the proposed closure area have been or will be notified at least 20 days prior to the event, by flyer or petition of the date, time, purpose and specific location of this event.

Signature (Authorized Event Coordinator) **Date(s) of Notification**

The Event Coordinator for _____ (Event Name)

is requesting the closure of _____ between _____

and _____.

The closure would occur between the hours of:

_____ (am/pm) and _____ (am/pm)

on ___ / ___ /20___ through ___ / ___ /20___ .

The closure, if granted, will be for the exclusion of vehicles only. A 20' emergency lane shall be provided on all streets within the said closure at all times. The undersigned persons, being owners, managers or lessees of property immediately adjacent to the area to be closed as described above, hereby convey their approval of the above-noted request.

1) Contact Name (Printed) Business Name or Property Address & Telephone

Signature

Date

2) Contact Name (Printed) Business Name or Property Address & Telephone

Signature

Date

3) Contact Name (Printed) Business Name or Property Address & Telephone

Signature

Date



City of Hendersonville
SPECIAL EVENT PERMIT
STREET CLOSURE/SIDEWALK IMPACT NOTIFICATION & PETITION
(FOR COMMERCIAL AREAS)
ADDITIONAL SIGNATURES PAGE



4) Contact Name (Printed) Business Name or Property Address & Telephone

Signature

Date

5) Contact Name (Printed) Business Name or Property Address & Telephone

Signature

Date

6) Contact Name (Printed) Business Name or Property Address & Telephone

Signature

Date

7) Contact Name (Printed) Business Name or Property Address & Telephone

Signature

Date

8) Contact Name (Printed) Business Name or Property Address & Telephone

Signature

Date

9) Contact Name (Printed) Business Name or Property Address & Telephone

Signature

Date

10) Contact Name (Printed) Business Name or Property Address & Telephone

Signature

Date