Date received:	
Date approved:	



CITY OF AUBURN SPECIAL EVENT/MASS GATHERING APPLICATION

Required for any special event on city property that will attract up to 1,000 people, or any outdoor event with continued attendance of 1,000 or more persons for 2 or more hours.

Applications must be submitted to the Clerk at least 45 days prior to the event if the gathering is

expected to attract up to 5,000 people. Application must be submitted at least 90 days prior to the event if the gathering is expected to attract more than 5,000 people. Date of Application: **SPONSOR INFORMATION** Name of Sponsoring Organization: Name of Contact Person for Event: Title of Contact Person: Mailing Address: Daytime Telephone: ______Cell Phone: _____ Email Address: Contact Name and Cell Phone Number DURING the Event: Is your organization incorporated as a non-profit organization? Yes______No ____ Non-Profit Number: **EVENT INFORMATION** Name of Event: Type of Event (walk, festival, concert, etc.): Date of Event: Rain Date:

Times of Event: Start Time including set-up:______Ending time including clean up: ____

Actual E	vent Start Time:		Actual Event End	11me:	
Estimate	d Attendance:				
Location	of Event:				
Have you	u held an event at	this location within the	last 12 months? Yes_		_No
	cation is a city parl your request beer	k, have you applied for un approved?	se of the property wi	th the Recr	eation Department
YesN	lo Pending	Date submitted to the R	ecreation Departmer	nt:	

TYPES OF PERMITS/PERMISSIONS NEEDED – PROVIDE AN ANSWER FOR EACH LINE:

Permit Fee	Permission/Permit Type			NOT SURE	
Not permitted	CROSS-STREET BANNERS Please note that the city no longer allows cross-street banners.				
Separate fee and permit possible	FOOD – Will food or beverages be sold? If yes, list what types of food or beverages:				
	Note - A food service license may be required and must be submitted 14 days prior to the event. Other requirements and/or restrictions may apply.				
Separate fee and permit possible	NON-FOOD ITEMS – Will products be sold or given away (such as t-shirts, crafts, souvenirs, etc.)? If yes, list what items:				
	Note - A peddler permit may be required and must be submitted 14 days prior to the event.				
N/A	LIVE MUSIC – Will there be any outdoor musical performances? If yes, please describe:				
N/A	SOUND AMPLIFICATION – Will there be a microphone or speaker system to project sound?				
Separate fee and permit possible	ALCOHOL – Will alcoholic beverages be sold? Note – Vendor must hold a valid State of Maine liquor license and submit an Off Premise Catering Event application 14 days prior to the event.				
Separate fee and Permit required	CARNIVAL – Will carnival rides be offered? If yes, attach a copy of the state permit. A city permit is required as well.				
Separate fee and Permit required	FIREWORKS – Will there be a fireworks display? If yes, a permit from the Fire Department is required.				
N/A	PARADE – Will there be a parade? If yes, describe route:				
	Note – A permit from the Police Department is required.				
N/A	RUN/WALK/CYCLE – Will event involve participants doing a walk-a-thon, road race, etc.? If yes, describe route:				
Separate permit required	BURN PERMIT – Will there be any open flame such as a bonfire? If yes, describe activity:				
	Note - A permit from the Fire Department is required.				

N/A	TENT/CANOPY – Will you be setting up a tent or canopy? If yes, list number and sizes:		
Separate fee and permit required	ELECTRICAL POWER/EQUIPMENT – Will electrically powered equipment be utilized, if so, provide a brief description of the equipment and the entity responsible for the installation of the electrical equipment?		
N/A	ROAD/INTERSECTION CLOSURE – Will any roads need to be closed to accommodate your event? If yes, please list:		
N/A	MAP/DIAGRAM – Is a map or diagram attached detailing this event and depicting the placement of such items as tables, tents, port-a-potties, stage, parking, food service areas, etc.? This is a mandatory requirement for this application and must be included.		
N/A	PARKING ACCOMODATIONS – What will be the anticipated need for parking and what is your parking plan?		
N/A	TOILETS – Please list amount at event and/or nearest location:		
N/A	WASTE DISPOSAL – Please list process and location:		
N/A	HAND WASHING FACILITIES – Please list amount at event and/or nearest location:		
N/A	POTABLE WATER – Please list amount at event and location:		
N/A	FIRST AID FACILITIES – Please list location at event:		
\$	TOTAL FEE INCLUDED – Checks payable to "City of Auburn"		

EVENT LIABILITY INSURANCE COVERAGE FOR EVENT

For an event such as a walk-a-thon, race, festival, concert, etc., the city requires general liability insurance coverage. The **City of Auburn** is to be named as "additionally insured" for the event activities on that date. Once the event is approved, the Certificate of Insurance will need to be received at least 30 days before the event and before permits can be issued. Please have the City of Auburn listed on the Certificate of Insurance (minimum coverage \$1,000,000 Bodily Injury or Death, per occurrence, and \$300,000 Property Damage, per occurrence). It should contain a clause providing that the policy may not be cancelled by either party except upon not less than 30 days written notice to the city. Please have your insurance company fax a copy to: City Clerk 207-333-6623.

DESCRIPTION OF EVENT – Please describe what will occur during your event

Signature of Applicant:		Printed Name:		Date Submitted:		
Please not	e that you will be contacted by	City Staff if you require ad	ditional pe	ermitting.		
<u>Please retu</u>	rn this completed application wi	:h diagram and any applicable	e fee to:			
MAIL:	City Clerk's Office 60 Court Street Auburn, ME 04210					
FAX:	207-333-6623					
EMAIL:	sdallaire@auburnmaine.gov					
PHONE:	207-333-6600					
DEPART	DEPARTMENT C	****FOR STAFF USE**** OMMENTS AND RECOMME APPROVE	ENDATION DENY	S: DATE	INITIALS	
Sanitaria	n/Health Inspector					
	icer/Land Use & Zoning					
F: -	artment					
Fire Depa						
Police De	partment					
Police De Public W	orks Department					
Police De Public W	orks Department on Department	OITIONS from any of the abov	e departme	ents:		