



City of Daphne Event Permit Application

TYPE OF PERMIT: Special Event/Fundraiser Parade/Run (Streets Use) Walk (Sidewalks Only)
 Athletic Complex/Sporting Event Other: _____

APPLICANT & ORGANIZATION INFORMATION

ORGANIZATION NAME: _____

APPLICANT NAME: _____

STREET: _____ CITY, STATE, ZIP: _____

CONTACT PHONE: _____ EMAIL: _____

"ON SITE" CONTACT PERSON DAY OF EVENT: _____

CELL PHONE: _____ EMAIL: _____

EVENT INFORMATION

EVENT NAME: _____

TYPE OF/PURPOSE OF EVENT: _____

EVENT DATE: _____ TIME (START- END): _____

ASSEMBLY TIME: _____ # PARTICIPANTS/VEHICLES: _____

EVENT LOCATION: _____

FULL DESCRIPTION OF EVENT (PLEASE LIST ANY TENTS, STAGING, PORT-O-LETS, OR SIMILAR ITEMS THAT WILL

BE USED ON-SITE): _____

SPECIAL REQUESTS

ROAD CLOSURE(S) REQUESTS: Yes* No *If Yes, please indicate which City Route is requested: _____

WILL YOUR EVENT REQUIRE BARRICADES: Yes* No *If Yes, please indicate quantity & location: _____

WILL YOUR EVENT REQUIRE ELECTRICITY: Yes* No *If Yes, you must provide your own extension cords

WILL YOUR EVENT REQUIRE WATER: Yes* No *If Yes, you must provide your own hose(s)

OTHER SPECIAL ITEMS FOR RENT:

TENTS: 20' X 40' # _____ X \$321.00 10' X 10' # _____ X \$123.00/EACH

TABLES: 8' L # _____ X \$45.00/EACH CHAIRS: # _____ X \$12.00/EACH

OTHER SPECIAL REQUESTS: _____

MARKETING & COMMUNICATIONS

PLEASE NOTE: As a City permitted event, the City of Daphne should be listed as a sponsor on all marketing materials promoting your event, such as, but not limited to, posters, social media outlets, website(s), t-shirts, promo items, etc. It is the event organizer's responsibility to request the official City logo from our Marketing & Events Department in a proper format. No other City of Daphne logo should be utilized. Please initial acknowledgement: _____

Is your event open to the general public? Yes* No

* If Yes, do you wish for your event to be listed and/or shared on: www.daphneal.com? Yes No

Facebook.com? Yes No Instagram? Yes No LinkedIn? Yes No

MARKETING CONTACT (IF DIFFERENT THAN EVENT APPLICANT OR "ON SITE" EVENT CONTACT):

NAME: _____ CONTACT PHONE: _____

OTHER MARKETING REQUESTS: _____

REVENUE/BUSINESS LICENSE

WILL SALES BE GENERATED AT YOUR EVENT: Yes** No ** If Yes, please provide your City of Daphne Business License Number here: _____

PLEASE NOTE: If you are providing food trucks or other third-party vendors, they MUST be a licensed business with the City of Daphne.

INDEMNITY & HOLD HARMLESS AGREEMENT

In consideration of the permission granted to me by the City of Daphne to use grounds, sidewalks, and/or streets, I hereby indemnify and hold harmless the City of Daphne, its agents, servants and employees from any and all claims and causes of action that may arise from injury to me or third party using the grounds, sidewalks, and/or streets who are injured or suffer property damage that is in any way caused by my use of the grounds, sidewalks, and/or streets. This indemnity and hold harmless agreement is given to the City of Daphne to protect the City and its agents, servants, and employees from cost of defense and claims for injuries and damages that may be caused either directly or indirectly by my use of grounds, sidewalks, and/or streets.

Further, I have read and understand all rules and regulations according to the City of Daphne Ordinance No. 2017-35 as set forth by the governing body of the City of Daphne and will abide by these rules and regulations. I understand that damage to City property, grounds, sidewalks, and/or streets can and will result in additional fees. I also understand that if at any time the City of Daphne appointed Law Enforcement, Code Enforcement, or other personnel feel that said rules and regulations are not being followed the function will be terminated with no refund of said fees.

I have read and understand the above, including the cancellation and indemnity policies.

APPLICANT SIGNATURE: _____ DATE: _____

INTERNAL USE ONLY

DATE REC'D: _____ CITY CLERK: _____

FIRE DEPT: _____ APPROVED ROUTE: _____

POLICE DEPT: _____ ROUTE MAP ATTACHED: Yes No

PUBLIC WORKS: _____

SPORTS & RECREATION: _____ EVENT FEE: Paid \$ _____ CHK# _____

MARKETING & EVENTS: _____ Waived: _____

** REVENUE: _____ PROOF OF INSURANCE REC'D: Yes No