

SPECIAL EVENT PERMIT APPLICATION

Special Event Circus Carnival Event No: _____



12700 NORWALK BOULEVARD, NORWALK, CA 90650 • PHONE: (562) 929 - 5732 • FAX: (562) 929 - 5564 • WW.NORWALKCA.GOV

Please Print required information

| | | | | | | |
|--|--|--|--|---------------------------------------|--|--------------------------------|
| SPONSORING ORGANIZATION | Sponsoring Organization(s): | | | | | |
| | Address: | Street: | City: | State: | Zip Code: | Phone Number: () () |
| PERSON IN CHARGE <input type="checkbox"/> Copy of DL/ID Attached | Last, First Name: | | DL/ID: | DOB: | <input type="checkbox"/> 18 & Over | Email: |
| | Address: | Street: | City: | State: | Zip Code: | Phone Number: () () |
| PROPERTY OWNER <input type="checkbox"/> Letter of Authorization Attached | <small>Letter from Property Owner giving authorization for event on property must be included with this application.</small> | | | | | |
| | Last, First Name: | | | | | Email: |
| | Address: | Street: | City: | State: | Zip Code: | Phone Number: () () |
| Other Organizations Involved: | | | | | | |
| Description of Event: | | | | | | |
| Exact Location of Event: | | | Date(s): | Time(s): | | |
| Estimated Attendance: | | Admission Fee: | | Describe: | | |
| Describe Parking: | | | | | <input type="checkbox"/> Plot Plan Attached <small>Detailed Plot Plan MUST be attached with this application</small> | |
| Does any portion of this activity occur on a City Street, Sidewalk, or Park? <input type="checkbox"/> Yes <input type="checkbox"/> No | | | | | | |
| If yes, please describe: | | | | | | |
| Alcoholic Beverages Served? <input type="checkbox"/> Yes <input type="checkbox"/> No Sold? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Applicant 21 & Over By Whom?: | | | | | | |
| Security? | | <input type="checkbox"/> Provided | <input type="checkbox"/> Requested | <input type="checkbox"/> Not Required | | |
| Food Served? | | <input type="checkbox"/> Yes <input type="checkbox"/> No | Sold? <input type="checkbox"/> Yes <input type="checkbox"/> No | By Whom?: | | |
| Drawing, Raffle or Casino Activities? | | <input type="checkbox"/> Yes <input type="checkbox"/> No | Type: | | | |
| Canopies or Tents? <small>If yes, please indicate size and attach Plot Plan</small> | | <input type="checkbox"/> Yes <input type="checkbox"/> No | Install Date: | Removal Date: | By Whom?: | |
| Are Booths, Bleachers, Stage or structures to be erected? | | <input type="checkbox"/> Yes <input type="checkbox"/> No | Describe: | | | |
| Will Generators, Large Vehicles, or Other Equipment be used? | | <input type="checkbox"/> Yes <input type="checkbox"/> No | Describe: | | | |
| Any Commercial Aspects? | | <input type="checkbox"/> Yes <input type="checkbox"/> No | Describe: | | | |
| Sound Amplification Used Outdoors? | | <input type="checkbox"/> Yes <input type="checkbox"/> No | If yes, hours of use: | | Maximum Distance Audible: | |
| Describe Sound Equipment: | | | | | | |
| Please describe any Signs, Banners, Balloons, Sidewalk Sign Walkers, and Other Advertising? | | | | | | |
| Additional Information (Celebrity Guests, Special Activities, etc.): | | | | | | |

I hereby certify the foregoing statements to be true and correct, and agree to indemnify and hold harmless the City of Norwalk, its City Council, Officers, Agents and Employees from and against any and all loss, damages, liability, claims, suits, costs and expenses, whatsoever, including attorney's fees, regardless of the merit or outcome of any such claim or suit arising from or in any manner connected to the requested activity. I also agree, if approved, to comply with all permit conditions, and understand that failure to comply with any condition, or any violation of law may result in the immediate cancellation of the event, denial of future events and /or criminal prosecution.

Applicant's Signature

Title

Date

FOR OFFICE USE ONLY

| | | | | |
|--------------------|-----------|-------------|-------------|-------------|
| Permit Fee | Date Paid | Receipt No. | Received By | License No. |
| Approved By: | | Denied By: | | Date: |
| Reason for Denial: | | | | |