



Special Event Permit Application
 Town of Spring Lake
 300 Ruth Street
 Spring Lake, NC 2830
 (910) 605-1634

Please complete and submit the checklist, application, and all necessary supporting documentation to obtain a permit. Submitting complete and accurate information at the beginning will result in more efficient processing of your request.

Submittal Requirements

Staff Use	✓ or N/A	All Request Shall Include:
		Enter ✓ or NA in the column to the left ✓=Provided NA=Not Applicable
	<input type="checkbox"/>	One original of the Special Event Permit Application completed and signed with ink. Please complete the application fully. If you have any questions regarding the required information, please contact the Town Manager or Stephanie Hutchins at (910) 985-7265. Note: Permit requests must be submitted at least 30 calendar days prior to the event.
	<input type="checkbox"/>	Fees (Includes fees with Fayetteville Cumberland Parks and Recreation and the Town of Spring Lake)
	✓ or N/A	This Request May Also Require:
	<input type="checkbox"/>	Event Layout Map- A map must be provided indicating the location of requested street closures, vendors, port-a-johns, stage and entertainment areas, picket travel routes, and any other significant details. If you have chosen a predetermined Town-approved race route, select this option on the application.
	<input type="checkbox"/>	Proof of Insurance or applicable rider-This insurance shall include the Town of Spring Lake and the City of Fayetteville as additional insured parties with regard to any liability that may arise as a result of the employment of any off-duty Spring Lake police officers. Commercial General Liability – Combined Single Limits of no less than one million dollars (\$1,000,000.00) for each occurrence and two million dollars (\$2,000,000.00) for aggregate claims.
	<input type="checkbox"/>	Certified Crowd Manager Training is required for any event with more than 1,000 people in attendance with one crowd manager for every 250 people. The CCM Training is conducted for free online through the NC Office of State Fire Marshal at the following link: https://www.ncosfm.gov/licensing-cert/pyrotechnics/classes-pyrotechnic-license-fusing-crowd-manager . Each participant will be granted a certification upon completion.
	<input type="checkbox"/>	ABC Permit is required for all events that involve the sale or use of alcoholic beverages.
	<input type="checkbox"/>	Police Staffing Costs are assessed at the current per-officer rate. Payment is required prior to the event.
<p>Contact Information: If you have questions regarding this application, please contact Stephanie Hutchins or the Town Manager at the following:</p> <p>Stephanie Hutchins, Inspections Department Town Manager Direct (910) 985-7265 (910) 985-1813 Email: shutchins@townofspringlake.com Email: townmanager@townofspringlake.com</p>		

GENERAL INFORMATION - PART 1	
EVENT INFORMATION (All fields in this section are required)	
Event Name:	
Type of Event: <input type="checkbox"/> Bicycle/Footrace <input type="checkbox"/> Outdoor market/festival <input type="checkbox"/> Parade/March <input type="checkbox"/> Other _____	
Event Location & Address:	
Event Website:	
Event Start Date & Time:	Event End Date & Time:
Load-in Date & Time:	Load-out Date & Time:
Inclement Weather Start Date & Time:	Inclement Weather Event End Date & Time:
Event Description (detailed description of the event and its purpose)	
Estimated Attendance:	Last Year's Attendance Numbers (if applicable):
APPLICANT & ORGANIZATION INFORMATION (All fields in this section are required)	
Applicant's Name & Title:	
Applicant's Address:	
Applicant's Phone:	Applicant's Email:
Business/Sponsoring Organization's Name:	
Organization's Address:	
Is this event co-sponsored by the Town of Spring Lake? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Town Department or Committee:	
Town Contact Person Name:	
Phone:	Email:
DAY-OF-EVENT CONTACT (If different from the applicant, provide information for a contact person who will be on-site the day of your event)	
Name & Title:	
Address:	
Phone:	Email:
Organization's Name (If different):	

EVENT OPERATIONS - PART 2 (All fields are required)

STREET CLOSURES

Are you requesting any street closures for your event? Yes No

FOOD SERVICE

Does the event involve the sale of food? Yes No

ALCOHOL SERVICE

Does the event involve the sale or use of alcoholic beverages? Yes No

TRASH & RECYCLING

Please describe your waste management staffing plan for the event. (i.e. who is responsible for collecting trash and litter during your event?)

PARKING

Please describe your overall parking plan for the event.

Note: Parking plans may be examined for ADA compliance and you may be required to provide a transportation shuttle if the event places undue demands on surrounding parking areas.

TENTS AND STRUCTURES

Will there be any tents, canopies, or temporary structures at the proposed event site? Yes No
If so, list the size of the tents, canopies, and temporary structures:

Note: Tents that are greater than 120 square feet require permits from the Inspections and Fire Department.

MISCELLANEOUS EVENT DETAILS - PART 3 (All fields are required)		
ADMISSION/VENDOR FEES		
Will admission fees be charged to attend this event? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Will fees be charged to vendors to participate in this event? <input type="checkbox"/> Yes <input type="checkbox"/> No		
MUSIC/SOUND/PYROTECHNICS		
<i>Note: In accordance with the Town of Spring Lake Ordinance Sec. 16-211., loud noises must end by 10:00 p.m.</i>		
Will there be musical entertainment at your event? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Will there be sound amplification for this event? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Does the event involve the use of pyrotechnics (fireworks, lasers, fire-dancing, etc.)? <input type="checkbox"/> Yes <input type="checkbox"/> No		
TOILETS/HANDWASHING STATIONS		
Will you provide portable toilets for the general public? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Will you provide portable handwashing stations for the general public? <input type="checkbox"/> Yes <input type="checkbox"/> No		
INFLATABLES/AMUSEMENTS		
Will inflatable parade balloons be used for this event? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Will any amusements (bounce houses, dunk tanks, etc.) be used for this event? <input type="checkbox"/> Yes <input type="checkbox"/> No		
MARKETING/PROMOTIONS		
Please describe how the event will be marketed, promoted, or advertised, including links to any social media outlets being used.		

AUTHORITY TO FILE APPLICATION		
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Required	County and State of North Carolina (as may be applicable to my request) and certify that the above information and accompanying documents are complete, true, and accurate to the best of my knowledge. In addition, I acknowledge that by filing this application, representatives from the Town of Spring Lake may enter the subject property for investigation and analysis of this request.
	<u>APPLICATIONS WILL NOT BE ACCEPTED WITHOUT SIGNATURE(S).</u>

Print Applicant Name	Applicant Signature	Date
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