

Special Event Application

Application, fee and deposit should be submitted
30 days prior to event

City of Tawas City

550 W. Lake St, PO Box 568
Tawas City, MI 48764

PERMIT NUMBER _____

APPLICANT INFORMATION

Applicant _____
Name _____ E-mail address _____
Address _____ Zip Code _____ Telephone Number _____ Fax Number _____

Date of Application _____ Sponsor(s) _____

Organization (if applicable) _____
Telephone Number _____

Names, Addresses, and Daytime Telephone Numbers of Two Organization Officers (Chairperson and Co-Chairperson if applicable)

1. _____
2. _____

EVENT INFORMATION

Have you held this event before? Yes No
If yes, provide event name, date: _____

Type of Event _____ Date of Event _____

Name of Park or Location _____ Location in Park (be specific) _____

(If appropriate) Start Location _____ Finish Location _____

Route _____

Number of Participants _____ Number of Spectators _____

Set-Up Begins _____ Clean-Up Ends _____
(Date & Time) (Date & Time)

Time Event Begins _____ Time Event Ends _____
(Date & Time) (Date & Time)

- * Will participants or spectators be charged? YES NO
- * Will there be vendors at the event? YES NO If yes, fee charged _____
- * Will profit vendors be selling food at the event? YES NO If so provide a copy of District Health Dept Certification.
- * Will non-profit vendors be selling food at the event? YES NO If so provide a copy of District Health Dept Certification.
- * Will there be merchandise available for sale YES NO
- * Will the event be advertised? YES NO
If so, describe advertising plan including dates and media outlets. _____
- * Will the event be advertised with banners or signs at the location? YES NO

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Park Rules: (Listed below are to be followed unless special authorization is given by Council)

No stakes to be driven into grounds (due to infrastructure in the parks)

No vehicles to be driven on to park grounds

No overnight stays or camping

No Pets (Dogs, Cats, etc.)

No Alcohol is allowed in the parks

Permits are not transferable

Applicants are responsible for cleaning and restoring the site after the event to the original state. The cost of any employee overtime incurred because of applicant failure to clean and/or restore the site following the event will be borne by the applicant.

Applicants shall be held liable for any and all damages or injuries to persons or property that may occur or be caused by the use of the permit. By accepting a permit, applicants agree to indemnify and hold harmless the City and the Department from any and all claims whatsoever that may result from such use.

As the applicant, I hereby certify that the information I have provided on the form is complete and accurate to the best of my knowledge. I agree to abide by the terms set forth in this application, and the Rules & Regulations of the City of Tawas City. I understand that failure to do so may lead to the cancellation of the event, the denial of future permit applications, or other legal action by the City.

SIGNATURE OF APPLICANT _____

**THERE IS A \$25 NON-REFUNDABLE ADMINISTRATIVE PROCESSING FEE
AND A \$250.00 DEPOSIT REFUNDABLE UPON FINAL INSPECTION OF THE PARK
CHECKS OR MONEY ORDERS SHALL BE PAYABLE TO: CITY OF TAWAS CITY**

Council Approved _____ Denied _____ Meeting Date _____

Special conditions of approval:

FINAL INSPECTION APPROVED _____ DATE _____
(DPW Inspector)

REFUND \$ _____ DATE _____

Date Received: _____
Received By: _____

City of Tawas City
550 West Lake Street ▪ PO Box 568 ▪ Tawas City, Michigan 48764

**Shoreline Park Electronic Message Sign/
To be use only with Park Reservations**

Date of Park Reservation _____

EVENT: _____

Shoreline Park Electronic Message Sign (application must be received at least 7 days prior to date requested)

Applicant _____
Name _____ E-mail address _____
Address _____ Zip Code _____ Telephone Number _____ Fax Number _____

MESSAGE TO BE PLACED ON ELECTRONIC SIGN

Event													
Date & Time													
Location													

Time Event Begins _____ Time Event Ends _____
(Date & Time) (Date & Time)

Requested Posting Date _____

Signature: _____ **Date:** _____

FOR CITY USE ONLY	
Tawas City Clerk: Approved _____ Denied _____ Date _____	
Days to be Displayed: _____ _____ _____	