

**TOWN OF FAIRFAX  
SPECIAL EVENT PERMIT APPLICATION  
GENERAL EVENT INFORMATION**

**Official Name of Special Event:** \_\_\_\_\_

\*\* \$50 Application Fee must be included with this application.

**Start Date:** \_\_\_\_\_ **End Date:** \_\_\_\_\_

**Times:**

	Mon	Tues	Wed	Thurs	Fri	Sat	Sun
Setup							
Start							
End							
Cleanup							

**Location of Event:**     Park/Public Property \_\_\_\_\_  
                                    Public Street/Sidewalk/Alley/Right of Way \_\_\_\_\_  
                                    Private Property \_\_\_\_\_  
                                    Other \_\_\_\_\_

**Please List Streets That May be Closed or Otherwise Affected by the Event:** \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**Location of Event Parking:** \_\_\_\_\_

**Estimated Attendance Per Day:**

0-250       250-500       500-1,000       1,000-5000       5,000+

**Estimated Attendance Entire Event:**

0-250       250-500       500-1,000       1,000-5000       5,000+

**Number of Booths:**

0-25       25-50       50-75       75-100       5,000+

**Advertising Will Consist of:**

Pre-event advertising through yard or other signs  
 Temporary directional / other signage during the event (no more than 24 hrs in advance)

## GENERAL EVENT INFORMATION

### Type of Event:

- |   |  |
|---|--|
| <input type="checkbox"/> Festival / Music Concert   | <input type="checkbox"/> Religious / Educational         |
| <input type="checkbox"/> Rally / Memorial           | <input type="checkbox"/> Street / Block Party            |
| <input type="checkbox"/> Parade                     | <input type="checkbox"/> Fun Run / Walk A Thon/5k        |
| <input type="checkbox"/> Run / Walk Greater than 5K | <input type="checkbox"/> March Utilizing Public Property |
| <input type="checkbox"/> Public Assembly            | <input type="checkbox"/> Sport (fishing, soccer, etc.)   |
- (For political purposes)
- Other \_\_\_\_\_

### Event Will Have:

- |   |   |
|---|---|
| <input type="checkbox"/> Bounce House                   | <input type="checkbox"/> Bungee Jump    |
| <input type="checkbox"/> Rock Wall                      | <input type="checkbox"/> Dunk Tank      |
| <input type="checkbox"/> Amplified Sound                | <input type="checkbox"/> Marching Units |
| <input type="checkbox"/> Vehicles                       | <input type="checkbox"/> Water Slides   |
| <input type="checkbox"/> Animals                        |   |
| <input type="checkbox"/> Other high-risk activity _____ |   |

### Permit & Other Requirements:

- |  |                                    |
|--|------------------------------------|
| <input type="checkbox"/> Alcohol will be served, sold, raffled, etc.                                       | State permit acquired? _____       |
| <input type="checkbox"/> Food & Non Alcoholic Beverages  | State permit acquired? _____       |
| <input type="checkbox"/> Non-Food related sales and/or display booths                                      | State permit acquired? _____       |
| <input type="checkbox"/> Barricades / Detours (city streets, roads, etc.)                                  | State/Local permit acquired? _____ |
| <input type="checkbox"/> State Hwy Closures  | State permit acquired? _____       |
| <input type="checkbox"/> Cooking Equipment.  | State permit acquired? _____       |
| <input type="checkbox"/> Solid Waste & Recycling   | State/Local permit acquired? _____ |
| <input type="checkbox"/> Fires or candles  | State/Local permit acquired? _____ |
| <input type="checkbox"/> Fireworks.  | State/Local permit acquired? _____ |
| <input type="checkbox"/> Activities in park outside normal operating hours                                 | Local waiver acquired? _____       |
| <input type="checkbox"/> Large Generator(s) requiring a separate Electric panel box to be wired off of it) | State/Local permit acquired? _____ |
| <input type="checkbox"/> Tent and/or canopy  | State/Local permit acquired? _____ |
| <input type="checkbox"/> Other applicable State or Local Permit required? _____                            |                                    |

### Arrangements Have Been Made For:

- |   |   |
|---|---|
| <input type="checkbox"/> Restrooms & Hand Washing | <input type="checkbox"/> Tent Heating                 |
| <input type="checkbox"/> Event Insurance          | <input type="checkbox"/> Public Safety / EMS Services |
| <input type="checkbox"/> Fire Extinguishers       | <input type="checkbox"/> Advertising Banners/ / Signs |
| <input type="checkbox"/> Drinking Water           | <input type="checkbox"/> Grey Water & Grease Removal  |
| <input type="checkbox"/> Weather Contingencies    | <input type="checkbox"/> LP Gas                       |

In the Event of Severe Weather:

Open and Available Shelter Locations Will Include:

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Identify Who Will Cancel the Event if Necessary: (name, title and phone number)

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Public Safety Site Plan:

Attach a schematic drawing of the event site location. The drawing must be legible and drawn to scale. The public safety plan must include the following items if they will be provided, or if they are required.

- Security Staff
- Signed detour route per Town of Fairfax/State of Vermont
- First Aid Station(s)
- Security Staff
- Information / Ticket Booths
- Emergency Contact Event Personnel
- Fences
- Assembly Area & Approximate Occupant Amounts
- Booths, stages and event structures
- Boundaries of the Event
- Event Parking
- Exits & Gates (gates must be numbered)
- Barricades
- Fire Extinguishers
- Generators
- Severe Weather Shelters
- Temporary Roadways
- Fire / EMS access Road
- Rest Room facility locations

Provide any additional information the Town should consider or may be relevant to a review of this application.

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Organization(s) Sponsoring Event:

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Town: State Zip \_\_\_\_\_

Check this box if this organization is tax exempt and provide proof with this application and include a copy of your organization's VT Sales and Use Tax Exempt Certificate.

### CONTACT INFORMATION

**Primary Contact:** \_\_\_\_\_

Daytime Phone: \_\_\_\_\_ Cell #: \_\_\_\_\_

Email: \_\_\_\_\_

Address: \_\_\_\_\_

City: State Zip \_\_\_\_\_

**Secondary Contact:** \_\_\_\_\_

Daytime Phone: \_\_\_\_\_ Cell #: \_\_\_\_\_

Email: \_\_\_\_\_

Address: \_\_\_\_\_

City: State Zip \_\_\_\_\_

**\*\*Primary and/or Secondary Contacts Must Be Onsite at All Times of the Event\*\***

### EMERGENCY CONTACT INFORMATION

The public will be notified of a safety and/or security issue(s) in the following manner:

- |  |   |
|--|---|
| <input type="checkbox"/> Contacting Local Police and Fire Services | <input type="checkbox"/> Onsite PA System |
| <input type="checkbox"/> Local Radio Station                       | <input type="checkbox"/> Word of Mouth    |
| <input type="checkbox"/> Other _____                               |   |

If a Private Security Firm has Been Contracted, List Their Information Below:

Security Provider: \_\_\_\_\_

Contact Person: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Location of Provider at Event Site: \_\_\_\_\_

Location of Missing Persons Station: \_\_\_\_\_

If the Event Takes Place on Town Property (Parks, Town Streets, or Other Town Owned Facilities) in Whole or In Part:

- I have reviewed the proposed location for the event and determined suitability for our proposed use.
- There are no requested changes, upgrades or safety concerns identified
- I understand and acknowledge that it is the event organizer's responsibility to inspect the area the event is to take place and notify the Town of Fairfax at (802) 849-6111 of any safety concerns.
- I have reviewed and have considered the Contingency Plan information provided by the Town of Fairfax along with this application, if applicable.
- I have reviewed and understand the Town's Insurance Requirements for Special Events.
- I have reviewed and understand the Town's Special Events Ordinance.
- I have enclosed the event's Public Safety Site Plan.
- I have enclosed other information that we believe is necessary or helpful to describe the planned event.

### SIGNATURE

**I am allowed to sign this application on behalf of the event sponsor. The information contained in this application for a Special Event permit is true, correct, and complete to the best of my knowledge. If there are any changes to the Special Event, I agree that I will promptly notify the Town of Fairfax of these changes and request approval of them.**

\_\_\_\_\_  
(Sign Name)

\_\_\_\_\_  
(Date)

\_\_\_\_\_  
(Print Name)

\_\_\_\_\_  
(Print Title with Organization)

**SPECIAL EVENT  
INDEMNIFICATION AND HOLD HARMLESS AGREEMENT**

EVENT: \_\_\_\_\_

ORGANIZER(S): \_\_\_\_\_

\_\_\_\_\_

The event organizer agrees that it, not the Town of Fairfax, will be solely responsible for all incidents to the event. This responsibility of the organizer to the Town includes but is not limited to the actions of the event organizer, its officers, employees, agents, and volunteers, along with event vendors, contractors, subcontractors, participants, and visitors.

In consideration for the Town's approval of the Special Event except to the extent such claims arise from the negligence or misconduct of the Town, the organizer of this event agrees to indemnify and hold harmless the Town of Fairfax, and its officers, council members, agents, employees, and authorized volunteers, from, for, and against and agrees to defend the same from and against, any and all suits, claims, grievances, damages, costs, expenses, judgments, and/or liabilities, including costs of defense and reasonable attorney fees, and further agrees to pay any settlement entered into or on the behalf of, or judgment entered against, the foregoing individuals and/or entities.

The event organizer shall abide by the Town's insurance requirements for the event, including the addition of the Town of Fairfax, and its officers, council members, agents, employees, and authorized volunteers as additional insured's for the event.

The individual(s) signing this agreement has the authority to enter into this agreement on behalf of the organizer(s) of the Special Event.

\_\_\_\_\_  
(Sign Name)

\_\_\_\_\_  
(Date)

\_\_\_\_\_  
(Print Name)

\_\_\_\_\_  
(Print Title with Organization)

\_\_\_\_\_  
(Sign Name)

\_\_\_\_\_  
(Date)

\_\_\_\_\_  
(Print Name)

\_\_\_\_\_  
(Print Title with Organization)

\_\_\_\_\_  
(Sign Name)

\_\_\_\_\_  
(Date)

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(Print Name)

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(Print Title with Organization)

## **SPECIAL EVENT CONTINGENCY PLAN For Review Only**

Event sponsors should review and consider the following issues when they are planning or preparing for an event. Many of these issues are required by one or more regulations, or are components of larger regulations. Considering other issues which may not be required should contribute to the planning and operation of the event. Developing responses to these questions should result in more productive and fruitful discussions with the various departments with the Town during their review of the Special Events Application.

### **Weather related issues: rain, snow, severe storms, tornadoes, etc.**

If the weather forecast includes bad weather, will the event be cancelled? If so, how will attendees be notified?

Develop a plan for the sudden onset of severe weather. Where will the people go and who is designated to assist in their safe arrival at the safe refuge place?

Is there an area of safe refuge in case of tornado?

### **Medical issues**

Where will ambulance access to the event be in case one is needed?

Who will conduct crowd control in the event of a medical emergency?

Will a first aid station, with trained first aid provider, be provided at the event? Where?

If applicable, is there adequate shade to prevent heat stroke? Will water be provided? Where?

### **Crowd Control**

Who will monitor the barricades?

Who will work the entry gates? Maintain egress and access?

Who will patrol the area to prevent incidents from getting out of control?

Develop a plan for those patrolling the crowd of what to do if they encounter unruly behavior. Have communication equipment.

### **Security**

Will there be Police Officers providing security? If so, contact the Police Department for applicable requirements or guidelines relating to the number necessary.

If volunteers or private agencies provide security, will they have appropriate phone numbers for EMS, Fire, and Police?

If applicable, what will security officials do if non-paying attendees breach the gate/perimeter?

If a complaint is received, for example, for loud music, how and who will handle the complaint?

Provide communications equipment. Portable radios, cell phones, and access to land lines.

If applicable, secure monies in an area not accessible to the attendees.

### **Logistics**

Where will there be, or will there be, a staging area for support staff?

What time will the crowd be disbursed and by whom?

Who will conduct clean up?

Remember to maintain fire lanes and access roads.

Appoint one person to oversee and take responsibility for the event. Who?

Will an adequate amount of restroom facilities be provided? Where?  
Is there adequate safe parking provided? Where?