WELCOME

We are happy you have chosen to plan a special event within the City of Mount Pleasant. From community-based festivals to parades and fairs, the City of Mount Pleasant is proud to approve permits for a number of exciting special events each year.

The Mount Pleasant Municipal Code (112.15-112.28) provides the framework and guidance for the issuance of Special Event Permits within the City of Mount Pleasant. In general, any organized activity impacting city services or involving the use of, or having an impact on, public property, public facilities, sidewalks, medians, or street areas requires a permit.

The following pages include the City of Mount Pleasant **Special Events Permit Application** and accompanying instructions developed to guide you through the process.

Timing

A completed application may be filed as early as six months before the event but must be received no later than 30 days before the actual event date.

After you complete the application, sign the form please return it to Regina Reynolds, at 500 N Madison Mount Pleasant. Please be sure to include your application fee with the application. (Checks can be made payable to City of Mount Pleasant).

Permit Process

The permit application process begins when you submit a completed Special Event Permit Application. Keep in mind that acceptance of your application should in no way be construed as final approval or confirmation of your request.

Upon receipt of your application, Regina Reynolds will help guide you through the permit process. She will then distribute copies of your application to all City departments affected by your application for review. During the review process you will be notified if your event requires additional information, permits, or licenses. You will be allowed time to provide us with all pending documents. Delays in providing these items often delay our ability to finish our review and issue a Special Event Permit for your event. You may be contacted individually by these departments if they have specific questions or concerns about your event.

Depending on the impact on City services, size and type of event, a group meeting with all affected departments, your coordinator, and you may be scheduled to clarify questions and concerns.

Other Permits

While we have tried to make this process a "one-stop" process, it is your responsibility to contact federal, state, or county agencies for other relevant permits.

Events in Parks

To book a Special Event in the park, contact Regina Reynolds at 903-575-4149.

Events at the Civic Center Pavilion

If you plan to hold your event at the Civic Center Pavilion, you will need to contact the Mount Pleasant Civic Center Office. Special rules and restrictions unique to the site or facility may apply. To book a Special Event at the Civic Center Pavilion, contact Civic Center Manager at 903-575-4190.

Fees

The City strives to keep fees as low as possible by charging only the cost of processing the application and City services. In addition to the cost of processing, other services (i.e. security, waste, and toilet facilities), other fees such as health/food safety permit, facility rental fees may apply. Depending on the type of event, respective fees may vary.

On behalf of the City of Mount Pleasant, we thank you for contributing to the spirit and vitality of our City through the staging of your event. **Best wishes for a successful event!**



Please print clearly in pen or type your answers.

APPROVED APPLICATION MUST BE AVAILABLE ONSITE DURING EVENT

Date Application Submitted: Separation Submitted: Separation Submitted: Separation Separation Separation is Exempt: Separation is Exempt by Ordinance Name of Event: Expected Attendance: Time Event Starts: Time Event Ends: Event Location: Organization Name: Contact Name: Email Address: City/State/Zip: Phone Number(s):

APPLICATION INSTRUCTIONS

Type of Event (Check	all that Apply):		
☐ Conce ☐ Bicycle ☐ Carniv ☐ Car Sh ☐ Other	e Race ral ow	☐ Political Activity ☐ Dance ☐ Parade ☐ Petting Zoo	☐ Festival ☐ Promotional or Sales Even ☐ Run/Walk ☐ Fair
Will alco	hol be served at you	r event?	
□ YES	□ NO		
-	ty's commitment to		ervice mer service, we will help you ges applicable to your event.
	Name: Phone Num Email: Address:	ber: 903-575 <u>rreynolo</u> 500 N N	Reynolds -4149 ds@mpcity.org Madison Pleasant, Texas 75455

SUMMARY OF EVENT

Description				
-				
	-			
Anticipated Attendance	Total	Per Day		
1. Date/Time	Date	Time	Day of Week	
Setup	Date	Time	Day of Week	
Event Starts	Date	Time		
Event Ends Dismantle	Date		•	

ORGANIZATION CONTACT INFORMATION

Organization Information

1. Is the organization a non-profit organization?	YES	NO
Please include your tax ID number:		
2. Is the organization a community group without non-profit status?	YES	NO
If you checked "Yes" to either question 1 or 2 above, Please include a copy of your Tax-E	xempt Certifi	cate
3. Is the organization a business?	YES	NO
4. Is the organization a for-profit organization?	YES	NO
SITE PLAN INFORMATION		

Use of Public Property or Public Right of Way 5. Will any part of this event take place in a City of Mount Pleasant Park? YES NO If yes, name of park where event will take place: 6. Will any part of this event take place on a sidewalk, street, median, or other YES NO **Public Right of Way?** 7. Will any part of this event/activity take place on a City parking lot, YES NO City-owned land, or other City public property? 8. Will this event take place on public property in Mount Pleasant that is not owned YES NO by the City of Mount Pleasant (Titus County, etc.)? If yes to #8, please provide the following information: Entity Name_____Contact Person ____ Telephone Number __Email Address _____ **DOCUMENTATION NEEDED: SITE PLAN Attachment "A"** Please submit a Site Plan showing all uses of public property and public right of way in Attachment

	TRAFFIC & PARADE
	INFORMATION
ich to o	lose any streets or sidewalks for this event?

9. Do you wish to close If yes, please list all street		walks for this event? you would like closed:	YES	NO
For what period of time Fromar			_	
		uipment before, during or after this event?	YES	NO
11. Will any traffic rout If yes, you must use TxDC For what period will the tr	OT approved devices.		YES	NO
From Set Up: Date	Time	To Dismantle: DateTime	e	
12. What kind of traffic	routing/control dev	vice will be used?		
13. Who will be setting	up the traffic routin	ng/control devices?		
14. Who will be directing	ng traffic? (see Secu	rity section)		
15. Does this event invo	lve a moving route o	of any kind along streets or sidewalks?	YES	NO
	nals will be used in t	the event?		NO
What is the purpose of the	animals (petting zoo	o, part of parade, etc.)?	• • • • •	
DOCUMENTAT	ION NEEDED: TR	AFFIC CONTROL / DETOUR PLAN Attac	hment "R	"

PARKING PLAN		
17. Please provide a description of your parking plans (i.e., where event attendees will particularly and the second of the seco	r k):	
18. Please describe your plans for disabled parking:		
19. Please describe your plan for emergency vehicle access:		
20. Please describe your plans to notify residents, businesses and churches impacted by the		
DOCUMENTATION NEEDED: PARKING PLAN Attachment "C"		
Tents, Structures, or Entertainment Devices		
21. Are you installing or constructing any structures, including buildings, climbing structures, etc.?	YES	NO
If yes, please show structures on the site plan (Attachment "A"). Also, please describe the type, size, and number of structures. Plans may be required for review.		
22. Are you installing any tents or canopies? Canopy Size: Tent Size:	YES	NO
If yes, please show all tents and/or canopies including dimensions on the site plan. If any tents are g square feet or if any canopies are greater than 400 square feet, provide the following for review: Flame spread certificate Interior tent/canopy plan.	reater th	an 200
23. Are you installing any stages?	YES	NO
If yes, please show locations and dimensions on the site plan (Attachment "A").		
Any stages greater than 30" above grade are required to meet structural, guardrail, stairway and accerequirements and the following must also be provided for review:	ssibility	7
Construction plans Structural calculations may be required		
24. Are you installing any grandstands, bleachers, or folding or telescoping seating?	YES	NO
If yes, please show locations and dimensions on the site plan (Attachment "A").		
Any grandstands, bleachers and/or folding or telescoping seating greater than 30" above grade is recurrently accessibility, guardrail and handrail requirements and also submit the following for review Construction plans Structural calculations may be required		meet
25. Do you plan to have any sound amplification?	YES	NO
Music Other, please describe		

If, yes please note the dates and times:			
26. Is electrical power required (for sound amplification, lighting, etc)?			
If yes, please show items on the site plan (Attachment "A") and describe how power is to be provided Additional review may be required:	d.		
Portable generator PGE temporary power service Other, please describe			
27. Will there be carnival rides and game booths?	YES	NO	
A copy of a valid "Ride Safety Certification inspection Report" must be provided for ea	ach ride	•	
28. Will there be any automotive shows or motor vehicle events?	YES	NO	
29. If you answered yes to any of the questions from #26-28, please provide the following information person or company responsible for installing the tent, structure, or entertainment device:	mation	of the	
Name:			
Office Phone Number:			
Cellular Phone Number:		-	
FOOD, AND MERCHANDISE INFORMATION			
FOOD, AND MERCHANDISE INFORMATION	YES	NO	
FOOD, AND MERCHANDISE INFORMATION Food			
FOOD, AND MERCHANDISE INFORMATION Food 30. Will food be prepared, served, or sold at this event?			
FOOD, AND MERCHANDISE INFORMATION Food 30. Will food be prepared, served, or sold at this event? If yes, please describe how food will be served and/or prepared	YES		
FOOD, AND MERCHANDISE INFORMATION Food 30. Will food be prepared, served, or sold at this event? If yes, please describe how food will be served and/or prepared 31. Is cooking equipment included?	YES		
Food 30. Will food be prepared, served, or sold at this event? If yes, please describe how food will be served and/or prepared 31. Is cooking equipment included? If yes, please show location on site plan (Attachment "A") and provide the following for review Type of cooking system Type of fuel (Please check all types): Gas Electric Charcoal	YES		

VENDORS	7	
32. Will food, goods or services be sold at your event?	YES	NO
If yes, please describe and attach a complete list of vendors to Attachment "D"		
33. What is the anticipated number of Vendors?	_	
DOCUMENTATION NEEDED: VENDOR LIST Attachment "D" Event organizers must provide a list of all vendors that includes the vendor's name, business and business telephone number and description of what will be sold.	ss addre	ss I

EVENT COORDINATION AND ON-SITE INFORMATION

Advertising Information

	place any signs or banners or other advertisement at the event site? e location(s) on the site plan (Attachment "A") and provide the following	YES	NO
	Sign detail Dimensions Method of attachment or support Display time period		
35. Do you plan to p	place any signs or banners on private property other than the event site	? YES	NO
If yes, please indicate for review:	locations on the site plan (Attachment "A") and provide the following		
	Sign detail Dimensions Method of attachment or support Display time period		
	ing to place any signs or banners on or in public property or light poles, fences, etc.?	YES	NO
If yes, please indicate	locations on the site plan (Attachment "A") and provide the following for a Sign/banner detail Dimensions Method of attachment or support Display time period	eview:	
(Banners/signs are n	ot allowed at the landscaped area located at the intersection of Ferguson	and Je	fferson)
37. Person responsi	ble for installation and removal of all items.		

	SECURITY	
street closures, cond	control may be required for your event. For example: Large corts, events with approved alcohol sales or events that sell guar Law Enforcement presence. Have you consulted with the Moabout your event?	ns or knives
If yes, who did you speak	with?	
If no, who should the Poli	ce Department contact to consult with about your event?	
Name	Telephone Number	
Note: Events requiring a Law	City/State/Zip w Enforcement presence are paid for by the event organizer. The police sist you with your event planning.	
Police Department Commen	Do not write below this line.	
	OFESSIONAL EVENT ORGANIZER professional event organizer to be a part of this event?	YES NO
If yes:	Telephone Number	
	Contact Person	
Name		

INSURANCE INFORMATION

40. Do you have general liability insurance naming the City of Mount Pleasant as an additional insured?	YES	NO
Minimum Limits of Liability are as follows: \$250,000 per person \$500,000 per occurrence for bodily injury or death, and \$100,000 per occurrence per property damage.		
Name of Insurance Agency and Agent (company must be licensed in the state of Texas)		
Address of Insurance Agency		
Telephone Number of Insurance Agency		
Policy Number:		
I certify that the information contained in this proposal is true and correct to the best of my known Name of Applicant:	wledge.	
Signature of Applicant:Date:		_
DOCUMENTATION NEEDED		

Portable Toilets and Handwashing Sinks

41. Do you plan to provide portable toilets and/or handwashing sinks at your event?			
☐ Yes – Please complete the following information:			
Number of regular toiletsNumber of ADA appro	ved toilets Number of handwashing sinks		
Name of Portable Toilet Company:			
AddressC	City, State, Zip		
Phone NumberF	ax Number		
Equipment Set-Up DateE	Equipment Pick-Up Date		
□ No - Please provide information as to the availability of restroom facilities in the immediate area of the event site that will be available to the public during the event (include ADA accessible and non-ADA accessible facilities).			
DOCUMENTATION NEEDED: SITE PLAN- Attachment "A" Please identify locations of all portable toilets, handwashing sinks on your site plan in Attachment "A."			

Garbage Services

42. How will the garbage waste be hand	dled at the eve	nt?	
Please specify below with the number and	l size of contain	ners:	
Number of Containers/Receptacles	Garbage	Size(s)	
Number of Dumpsters with Lids			
Number of Roll-off Bins			
Dates of garbage container drop-off:		and pickup:	
43. How will the event site be cleaned d	luring and afte	er the event?	
44. Does the event involve animals? If yes, cleanup of animal waste is required. Contact information for person or group regarbage and/or animal waste:		YES NO cleaning up event site and organizing the handling of	
Name:	Phone Number(s):		
		e SITE PLAN Attachment "A" ners on your Site Plan in Attachment "A"	
=		NTS NEEDED: 10) 678-7274 for garbage service	
	-	isible for expenses or fees associated) in Park Rental Fees – Renter is responsible.	

HOLD HARMLESS AGREEMENT

Special Events and Parades Permit Application	Date of Event:
Title of Event:	
Name of Applicant:	Phone Number
Address/City/State/Zip:	
Name of Event Sponsor:	Phone Number
Address/City/State/Zip:	
HOLD HARM	LESS AGREEMENT
"City") for all loss incurred by it in repairing or repla permittee, its officers, employee, agents, monitors, or	to reimburse the City of Mount Pleasant (hereafter called acing damage to City property proximately caused by the r any other persons attending or forming the special event permittee's control. Persons who merely attend or join in a
and employees from any liability to any persons, dan out of or alleged to arise out of the permitted event, v permittee, its officers, employees, agents, including r	monitors, or any other persons attending or joining in the ler the control of the permittee. Persons who merely attend
I understand and agree to comply with all the terms of has been approved and all special conditions and required	of the above Hold Harmless Agreement if my application uired advance payments have been met.
Signature of Permittee(s):	Date:
	Date:
Signature of Officer of Sponsoring Organization:	
Title:	Date:
I declare under penalty of perjury that the information	n provided in this application is true and correct.
Signature of Applicant:	Date:

AFFIDAVIT OF

I certify that the information contained in the foregoing application is true and correct to the best of my knowledge and belief that I have read, understand and agree to abide by the rule and regulations governing the proposed Special Event under the City of Mount Pleasant Municipal Code 112.15 – 112.28 and I understand that this application is made subject to the rules and regulations established by the City Council and/or the City Manager or the City Manager's designee. Applicant Agrees to comply with all other requirements of the City, County, State, Federal Government, and any other applicable entity which may pertain to the use of the Event venue and the conduct of the Event. I agree to abide by these rules and further certify that I on behalf of the Host Organization am also authorized to commit that organization, and therefore agree to be financially responsible for any costs and fees that may be incurred by or on behalf of to the Event to the City of Mount Pleasant.

Print Name of	Applicant/Host Organization	
Event Organize	<u>er</u>	
Title:		
Signature:		
Date:		
Other Officer		
Title:		-
Signature:		
Date:		

ATTACHMENT "A": SITE PLAN

ATTACHMENT "B": TRAFFIC DETOUR PLAN

Please include the following information on your traffic detour plan:

- All streets (including cross streets) which will be closed or otherwise impacted
- Location of traffic routing and control devices (barricades, cones, etc.)
- Directional arrows showing the detour route around the event
- Location of signs directing detoured traffic

If a Parade is involved, please also include:

- Staging area
- Judging area
- Ending area
- Location of bleachers, grandstands, or related structures
- Map with directional arrows showing the exact route of the parade

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ATTACHMENT "C": PARKING PLAN

Please provide the following information:

- Proof that adjacent property owners were notified of event (if required)
- Proof that adjacent property owners granted permission for event attendees to park on the adjacent property proposed for event parking.
- Adequate disabled parking
- Adequate publicity and signage to direct event attendees to available parking
- Other efforts to provide shuttle services to and from the event site, and/or to provide information on alternative transportation.

ATTACHMENT "D": VENDOR INFORMATION

For each merchandise vendor, please include the following information:

NAME OF VENDOR	ADDRESS	TELEPHONE	What Food, Goods & Services will be sold
			1