



City of Niles
 333 N. 2nd Street, Ste. 301
 Niles, MI 49120
 (269) 683-4700

Office Use Only
Application Fee: _____
Category: _____
Date Received: _____
Event Date: _____
Insurance Certificate _____

SPECIAL EVENT APPLICATION

This application must be completed, signed and forwarded to the City of Niles at least sixty (60) days prior to the first day of the event. Applications received within the 60 of the event are subject to late fees.

NOTE: A *Certificate of Liability Insurance* is required with all Class II event applications

Application Fee: Category \$25 Class I \$75 Class II Late Fee (Within 30 days of Event): \$100

NOTE: Class I = No In-Kind Services

1. APPLICANT INFORMATION					
Sponsor Name:					
Mailing Address	Street Address				
	City, State, Zip				
Applicant Contact	Name:		Secondary Contact	Name:	
	Title:			Title:	
Phone:	Cell:	Phone:	Cell:		
Email:		Email:			
Non-Profit Organization (tax ID # _____) Attach Certificate (Required)					
2. EVENT INFORMATION					
EVENT NAME					
Event Dates:	Indicate Day/Dates/Times OPEN to Attendees		Hours: Open until Closing		Expected Daily Attendance:
# Days	Date(s):		Start Time	End Time (curfew 10pm)	Spectators Volunteers
Event Setup Starts:			Event Take Down Complete:		
Start Day:	Start Date	Start Time:	End Day	End Date	End Time
Event Location:	Describe event and site map location: Attach Map (Required)				

3. TRAFFIC MANAGEMENT		
Will the event impact normal use of roads?	YES NO	<ul style="list-style-type: none"> • Attach map (Required) • Show the direction and the course that the parade or sporting route will take, including start and finish. • Show where any equipment is proposed to be positioned on or near the roadway. • Show where you suggest the participants, volunteers plan to park.
Street Closure	YES NO	<ul style="list-style-type: none"> • Date of street closure: From: _____ To: _____ • Time of street closure: From: _____ To: _____
Street Names Closed	Number of Blocks Closed	<ul style="list-style-type: none"> • Name of Street(s) (list if more than one street) <ul style="list-style-type: none"> • _____ • Block(s) Closed: <ul style="list-style-type: none"> • From: # _____ To: # _____
4. SITE SERVICES		
Access to Electric Service?	YES NO	<ul style="list-style-type: none"> Amplified Sound Amplified Music Vendor Electric Service
Access to Water Service?	YES NO	Location (Indicate where on map)
Policing?	YES NO	<ul style="list-style-type: none"> Monitor Event Traffic Control (Indicate where on map)
Barricades?	YES NO	# _____ Barricades (Indicate where on map)
Banner?	YES NO	<ul style="list-style-type: none"> • \$150 per Banner
5. WASTE MANAGEMENT		
Number of additional temporary toilets you are providing?		# _____ Number of Units
Number of additional trash receptacles you are providing?		# _____ Number of Receptacles
6. VENDOR		
Will there be vendors?	YES NO	<ul style="list-style-type: none"> • Mobile Food Vendor \$20 each • Merchandise Sale \$20 each # _____ Number of Vendors Food Vendors (County Health Department Certificate)
Will there be Tents or Canopies?	YES NO	<ul style="list-style-type: none"> • Indicate on Site Plan where tents or canopies will be. # _____ Number of Tents or Canopies 10' x 10' 20' x 20' Larger

Will there be alcohol?	YES	NO	<ul style="list-style-type: none">• \$200 Fee• Temporary Alcohol License Required• Certificate of Liability Required
Will there be inflatable bounce house?	YES	NO	<ul style="list-style-type: none">• \$50 Fee• Certificate of Liability Required
Will there be mechanical rides?	YES	NO	<ul style="list-style-type: none">• Certificate of Liability Required
Will there be Animals?	YES	NO	<ul style="list-style-type: none">• Certificate of Liability Required

7. Finance

What are your plans for funding event?	YES	NO	<ul style="list-style-type: none">• In detail, give a description on how the event will be funded.
Will you be requesting In-Kind Services?	YES	NO	<ul style="list-style-type: none">• In detail, give a description what services you are requesting from the City. Provide a site plan, if necessary.• 501(c) 3 Status Required

NOTE: If financial or in-kind services are requested, your organization may be subject to revealing financial disclosures to the City Clerk within 3 months after the event.

ADDITIONAL INFORMATION:

Sponsor's Signature

Date