

Special Event Permit

TOWN OF FORTVILLE

APPLICANT INFORMATION

Organization	GATEWAY COMMUNITY CHURCH OF FORTVILLE	Non-Profit	Yes ☒ No ☐
Street Address	125 STAAT ST. FORTVILLE IN 46040		
Email		Phone	559-416-1518
Contact Name	ANGELICA RANBULL @ gatewayfortville.org		

EVENT INFORMATION

Name of Event	WORSHIP IN THE PARK-MOTHERS DAY	Annual Event	Yes ☒ No ☐
Event Date	SUNDAY MAY 10TH	Event Time(s)	10AM - 12PM

Will your event include

Concert(s)/Live Music	YES ☒ NO ☐	5k/Run/Etc	YES ☐ NO ☒
Tents*	YES ☐ NO ☒	Inflatables, obstacles, rock walls, etc.	YES ☐ NO ☒
Concessions*	YES ☐ NO ☒	Fireworks, lasers, pyrotechnics	YES ☐ NO ☒
Alcohol*	YES ☐ NO ☒	Bingo, drawings, lottery, or similar	YES ☐ NO ☒
Signs or Banners prior to the event	YES ☐ NO ☒	Massage or similar activities	YES ☐ NO ☒
Additional Lighting, decorations, or similar	YES ☐ NO ☒	Portable restrooms*	YES ☐ NO ☒

**Please see page 2 for additional information required for these activities*

EVENT DESCRIPTION

WORSHIP SERVICE IN THE PARK. LIVE MUSIC. BEGINS AT 10AM WITH SET UP AT 8:45AM. SERVICE WILL END AT 11:15AM WITH CLEAN UP IMMEDIATELY AFTER. NO LATER THAN 12PM. MUSIC AND PRAISE IN GAZEBO AND CONGREGATION WILL SIT IN CHAIRS IN GRASS. THE CHURCH WILL PROVIDE BATHROOMS AND CLEAN UP.

EVENT LOGISTICS

Proposed Location	GAZEBO LANDMARK PARK		
Estimated Attendance	70	Estimated Number of Vendors	0
Event Start Date	MAY 10TH	Start Time	9AM
Event End Date	MAY 10TH	End Time	12PM
Set-Up Date	MAY 10TH	Time	8:45AM
Tear-Down Date	MAY 10TH	Time	11:15AM

PLEASE DESCRIBE YOUR PLAN FOR CLEANUP AND REMOVAL OF TRASH DURING AND AFTER YOUR EVENT

CHURCH VOLUNTEERS WILL CLEAN UP TRASH AND DISPOSE IN THE CHURCH DUMPSTER.

PUBLIC SERVICES REQUESTED

0

Special Event Permit

TOWN OF FORTVILLE

Please identify any public services including street closures and traffic control, electric service, etc. that you may need for your event:

Street or Alley Closure	YES ☐	NO ☒	
Event Barricades	YES ☐	NO ☒	
Traffic Control	YES ☐	NO ☒	
EMS Presence	YES ☐	NO ☒	
Picnic Tables	YES ☐	NO ☒	Number Requested _____/10 tables
Fire Inspection (required for tents)	YES ☐	NO ☒	*Tents over 200 square feet must include "No Smoking" signage and a fire extinguisher. Please contact the Fire Department for additional information and to schedule inspections.
Public Electric Service	YES ☐	NO ☒	Amperes/Voltage Requested _____
Public Water Service Connection	YES ☐	NO ☒	

Public water supply requires the use of an NSF-approved food grade hose, non-lead connections, and a back flow prevention device suited to the vendor's intended use. If carbonated drink systems will require a connection to the public water system, please indicate below the type of back flow prevention device that will be used.

N/A

Please describe any food or concession prep areas and/or alcohol sales and consumption planned for your event and attach a copy of your liquor license to the application.

N/A

You are required to provide portable restroom facilities at your event, unless you can substantiate the sufficient availability of both ADA accessible and non-accessible facilities in the immediate area which will be available to the public during your event. If you will not be providing portable restrooms, please attach a description of facility plan.

Total Number of Portable Toilets Proposed: <u>0</u>	Number of ADA Accessible Portable Toilets: _____
Portable Restroom Facility Provider: <u>0</u>	
Contact Number: _____	

Set-Up Date: _____ Time: _____ Pick-Up Date: _____ Time: _____

You are required to provide adequate trash services for your event. Please provide the contact information for the sanitation/recycling company that will provide clean-up services:

Trash/Sanitation Company Name: <u>CHURCH DUMPSTER (REPUBLIC) ON CHURCH PROPERTY</u>
Contact Number: <u>317. 485. 5418</u>
Number of Trash Cans With Lids: _____ Without Lids: _____ Recycling Containers: _____
Number of Dumpsters with Lids: _____ Without Lids: _____
Set-Up Date: _____ Time: _____ Pick-Up Date: _____ Time: _____

EVENT ATTACHMENTS

Please provide the following as applicable to your event

Event Route/Site ☐ *required	Vendor List ☐
---	--------------------------------------

Special Event Permit

TOWN OF FORTVILLE

Plan Agenda/Proposed Activities	☐ *required	Performer List	☐ ADAM SCHUNTICH Please include sound-check start/end time(s) 8:45am
Description of Security/Medical Plan	☐ N/A	Location of Stage(s)	☐ GAZERO @ LANDMARK
Parking Plan/Bus Routes	☐ N/A	Copy of 501 C(3) Exemption Letter	☐
Copy of Liquor License	☐ N/A	Copy of Insurance/Contact Information	☐
Copy of Health Department Approval	☐ N/A	Brief Description & Locations of signage/banners proposed	☐ N/A
Copy of notice to public/businesses of intended closures	☐ N/A	Other Attachments (Please List):	
Contact Information for Tent Vendor/Installation	☐ *required for Fire Inspections		

THE APPLICANT IS RESPONSIBLE FOR ENSURING THAT THE FOLLOWING REGULATIONS ARE MET AT ALL TIMES. FAILURE TO MEET ANY OF THE FOLLOWING WILL RESULT IN THE DENIAL OR REVOCATION OF THIS PERMIT AND POSSIBLE ENFORCEMENT ACTION BEING TAKEN AS OUTLINED BY THE TOWN OF FORTVILLE CODE OF ORDINANCES.

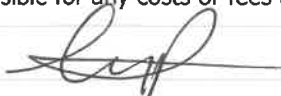
All Applicants shall be required to submit to the Town of Fortville proof of insurance and for general liability that states that the Town of Fortville, Indiana, is listed as an additional co-insured. The minimum insurance requirement shall be \$1,000,000 per occurrence; \$300,000 per person; and \$50,000 for legal. Amusement rides, inflatables, moving vehicles, rock walls, etc. will require proof of additional coverage. Special Event Permits are required for any obstruction, use, or activity within a public right-of-way, town property, or town easement. Any applications for encroachments must include a site plan that details specifically the number and location of encroachments. Site plans should detail uses planned for each section or route. In cases where the proposed activities will interfere with traffic flow on streets, the application will be assessed by the Fortville Police, Vernon Township Fire Dept., and Fortville Street Departments to determine the number of necessary town personnel and/or equipment. Fees will be assessed on a case-by-case basis based on the personnel needed and total time of the event. Under no circumstance does this permit give the applicant permission to set up any activity, staging area, or other event-related feature on private property. The undersigned shall notify the town 30 days prior to the event to ensure availability of resources. The applicant shall hold harmless and indemnify the Town of Fortville from, for, and against any claim of any person in tort, contract, or otherwise arising out of the act or omissions of the applicant, their agents, representatives, participants, etc.

Based upon the size, location, and nature of your event, additional town resources may be required. These resources will be assessed and required by various town personnel and the cost will be reflected in your total permit fee. The base permit fee is \$70.

APPLICANT AFFIDAVIT

I certify that the information contained in the foregoing application is true and correct to the best of my knowledge. I believe that I have read, understand, and agree to abide by the rules and regulations governing the proposed Special Event under the Town of Fortville Municipal Code, and I understand that this application is made subject to the rules and regulations set forth by the town. As the applicant, I agree to comply with all the requirements of the town, County, State, Federal Government, and any other applicable entity which may pertain to the use of the Event venue and conduct of the event. I further certify that I, on behalf of the Host Organization, am authorized to commit that the organization to be financially responsible for any costs or fees that may be incurred by or on behalf of the Event to the Town of Fortville.

Applicant Signature:



Date:

4/26/24

Printed Name:

ANGELICA RANGULL

Relationship to Applying Organization:

ADMIN