



City of Mercer Island

Special Event Application

FOR SMALL EVENTS



- **Non-refundable Application fee: \$20.00**
- **Other fees may apply to approved permits**

Applicant Information

1. Applicant Name			
2. Company/Organization			
3. Mailing Address	City:		State:
			Zip:
4. Phone	Day:	Evening:	
	Cell:	FAX:	
5. E-mail			

Event Information

6. Name of Event:			
7. Describe general nature of event (i.e. Wedding, Company Picnic, School Event, etc.)			
8. Event Date(s)			
9. Event Setup date/time:			Event Takedown date/time:
10. Actual event date/time:			
11. Location:			
12. Facilities you plan to use (check all that apply):	<input type="checkbox"/> Park	<input type="checkbox"/> Street	<input type="checkbox"/> Sidewalk
	<input type="checkbox"/> Trail	<input type="checkbox"/> I-90 Ramp	<input type="checkbox"/> Other (describe)
13. Is the Event <input type="checkbox"/> Private OR <input type="checkbox"/> Public (Please select the checkbox after reading the description to the right)	A private event is one in which you have a specific guest list and know who is going to attend. A public event is open to the general public through word-of-mouth, flyers, signs, or media advertising.		
14. Will participants be charged a fee? <input type="checkbox"/> Yes <input type="checkbox"/> No	If Yes, please explain how much and purpose for collecting fee?		

Event Components

15. Please mark all items that apply to your event and provide details below.

<input type="checkbox"/> Alcohol <input type="checkbox"/> Amplified Sound <input type="checkbox"/> Animals <input type="checkbox"/> Bicycling <input type="checkbox"/> Bleachers <input type="checkbox"/> Boats <input type="checkbox"/> Carnival Rides <input type="checkbox"/> Caterer <input type="checkbox"/> Company Picnic <input type="checkbox"/> Concert/Live Music <input type="checkbox"/> Cooking/barbecue	<input type="checkbox"/> Dance or Drama <input type="checkbox"/> Drawing or Raffle <input type="checkbox"/> Dunk tanks <input type="checkbox"/> Electricity/Generator <input type="checkbox"/> Entertainers (clowns etc.) <input type="checkbox"/> Exhibits or Displays <input type="checkbox"/> Fencing/scaffolding <input type="checkbox"/> Festival <input type="checkbox"/> Filming-video <input type="checkbox"/> Filming-photography <input type="checkbox"/> Inflatable toys (i.e. bounce house)	<input type="checkbox"/> Fireworks <input type="checkbox"/> Food <input type="checkbox"/> Distribution/sales <input type="checkbox"/> Helium Balloons <input type="checkbox"/> Marching Bands <input type="checkbox"/> Parade Floats <input type="checkbox"/> Public Address System <input type="checkbox"/> Rally/Protest <input type="checkbox"/> Parking/shuttle <input type="checkbox"/> Race (timed event)	<input type="checkbox"/> Run (non-timed) <input type="checkbox"/> Satellite <input type="checkbox"/> Sporting Event <input type="checkbox"/> Stage <input type="checkbox"/> Tables/Chairs <input type="checkbox"/> Tents <input type="checkbox"/> Theater <input type="checkbox"/> Vehicles <input type="checkbox"/> Vendors <input type="checkbox"/> OTHER
--	---	--	--

16. Provide details for checked event components and describe any "other" items not on the list:

Attendance

17. Estimated total attendance		18. Register # of participants	
19. # of volunteers		20. # of staff:	

21. Will food be distributed at your event? No Yes If yes, please provide information on the type of food distributed, how it will be prepared and who will be handling and serving the food items:

22. If applicable, please provide: Health Permit # _____ Expiration date: _____

23. I anticipate the need for gate access to allow for set-up and take down: Yes No
 If Yes, Gate opening time for set-up: _____ Gate opening time for take-down: _____

WARNING: SUBMISSION OF THIS FORM DOES NOT GUARANTEE APPROVAL OF YOUR EVENT. Failure to complete all sections of this form or failure to meet all required submittals may result in delay, limitations, or cancellation of your event.

Signature of Applicant:

Date: _____

Final Review (Remainder of application to be completed by Special Events Coordinator)

Event Denied <input type="checkbox"/> <i>Comments:</i>	Customer notified of denial <input type="checkbox"/> <i>Comments:</i>	Date of denial notification: <i>Comments:</i>
Event Approved <input type="checkbox"/> <i>Comments:</i>	Customer notified of approval (with conditions explained if they apply) <input type="checkbox"/> <i>Comments:</i>	Date customer notified of approval: <i>Comments:</i>

Check-off List/Document Verification *Comments:*

<input type="checkbox"/> General coverage insurance received	
<input type="checkbox"/> Inflatable or "extra" insurance received	
<input type="checkbox"/> Food permit copy received	
<input type="checkbox"/> All additional requirements met	
<input type="checkbox"/> Music previewed (for performances)	
<input type="checkbox"/> Final payment made	
<input type="checkbox"/> Final permit sent to customer for signature	
<input type="checkbox"/> Contract with signature received	
<input type="checkbox"/> Event closed in CLASS and filed away	