

**Partridge Township  
Public Event Permit Application**

**EVENT INFORMATION**

Name of Event: \_\_\_\_\_ Type of Event (festival, athletic, etc.) \_\_\_\_\_

Event Location: \_\_\_\_\_

Event Set Up Date: \_\_\_\_\_ Start Time: \_\_\_\_\_ End Time: \_\_\_\_\_

Actual Event Date(s): \_\_\_\_\_ Start Time: \_\_\_\_\_ End Time: \_\_\_\_\_

Event Clean Up Date: \_\_\_\_\_ Start Time: \_\_\_\_\_ End Time: \_\_\_\_\_

Estimated Attendance: \_\_\_\_\_

Primary Contact Person: \_\_\_\_\_ Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_ Phone: \_\_\_\_\_

E-Mail: \_\_\_\_\_

Name of Contact Person During Event: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Admission Charged for Entry? Yes / No

Will alcohol be served at the event? Yes / No

If yes, will you be charging for or accepting donations for the alcohol? Yes / No

Certificate of Liability Insurance attached? Yes / No

Will food be served / provided / prepared on site? Yes / No

If Yes, please contact MN Dept of Health at 651-201-6027

Will sound amplification be used? Yes / No

If YES, hours and type:

No amplified sound 10 pm to 7 am

Event attendance at 100 persons or greater requires sanitation facilities, indicate sanitation facility's location on the site plan if required. If not required, describe sanitation plan here:

Describe parking arrangements for the event and show the traffic plan:

Describe trash removal and clean-up plan during and after event:

This permit is not transferable, nonrefundable, and is not valid for any other date or purpose than specified above. An approved copy of this permit must be available for inspection during the period of use.

**Special Events Waiver of Liability Agreement:**

I agree to abide by all applicable Township Ordinances regulating public events. I agree to indemnify and hold the Township of Partridge harmless for any personal injury claims resulting from our organized public event and waive any right to make claims or bring lawsuit against the Township or anyone working on behalf of the Township. I agree to pay for any damage done to public property, including roads as a result of our organization's use of property.

Please Note: Applications and other materials (map, traffic control, parking, etc.) submitted for approval will be considered final once the permit is approved the Township. Please be sure all information on the application is correct.

\_\_\_\_\_  
Signature of Application/Authorized Representative

\_\_\_\_\_  
Date

\_\_\_\_\_  
Address/City/St/Zip