



Date of Request: _____

City of Strafford Event Permit

This form is for citizens desiring to hold an event on City of Strafford property, including public streets.

Contact person name: _____

Phone: _____ Email: _____

Date of event: _____ Type of event: _____

In the event you need to cancel or postpone this event, please notify the City immediately.

Name of event: _____

Time event begins: _____ Time event ends: _____

Estimated attendance: _____ Media coverage expected? Yes No

Will this event require streets to be blocked off? Yes No

If yes, please list the affected streets or provide a map or schematic with the affected streets highlighted, and please indicate the direction of travel if appropriate.

Event insurance is required for any event held on City of Strafford property, including public streets. Please ask your insurance carrier for Event Insurance, adding the City of Strafford as an "additional insured" with coverage in amounts approved by the City. A copy of the insurance estimate is required to process this application. Proof of insurance will be required for approval.

Applicant:

Date

Approved by Martha E. Smartt, City Administrator

Date

For office use only:

City Administrator

Public Works

Police