



2022 Special Event Application

Please print clearly or complete electronically.

Please return a signed copy to the Fields/Events Booking Clerk located at 254 North Park Street, Brantford, ON N3R 4L1 . This is an application/request only and does not guarantee a permit will be issued or permission given. Please have this form completed and returned a minimum of **120 days** in advance of your event. Applicants holding a special event that requires the services of more than one city department will be required to attend a Special Event Advisory Team (S.E.A.T) meeting.

Contact Information

Date of Application: _____ Applicant Name: _____

Organization Name: _____ Alternate Contact: _____
Name that will appear on Certificate of Insurance

Mailing Address: _____
Street Address City Province Postal Code

Telephone (Home): _____ Cell: _____ Business: _____

Email: _____

Website: _____ Facebook: _____

In the event we receive inquiries regarding this event, please provide contact information that can be made available to the public.

Name: _____ Email: _____ Phone: _____

Event Information

Type of Event: _____

Event Name: _____

Date(s) of Event: _____

First Time Event: YES Returning Date of last event: _____

Location(s) of Event: _____ Additional Venue(s): _____

Set Up Begins: Date: _____ Start Time: _____ End Time: _____

Event Date Details: Date: _____ Start Time: _____ End Time: _____

Date: _____ Start Time: _____ End Time: _____

Date: _____ Start Time: _____ End Time: _____

Tear Down Begins: Date: _____ Start Time: _____ End Time: _____

of Event Participants: _____ # of Event Vehicles: _____ # of Event Spectators: _____

NOTE: A Certificate of Insurance confirming a minimum \$2,000,000 (two million) comprehensive general liability to cover Bodily Injury & Property Damage, is required at least 90 days prior to the event, and must include The Corporation of The City of Brantford as additional insured. Some events with higher risks (i.e. bouncy castles and provision of alcohol) require a minimum limit of \$5,000,000 (five million). Higher limits may be required, depending on the nature of the risk and is subject to approval by the City's Coordinator of Risk Management & Insurance.

Applicant Signature: _____ (I have the signing authority to bind the organization)

ADDITIONAL FEES MAY APPLY

Application forms must be submitted 120 days prior to your event	Yes	No	Details
Will event take place on municipal property which includes: sidewalks; roads; trails; community centre; parks, arenas, parking lots	<input type="checkbox"/>	<input type="checkbox"/>	
Selling or serving alcoholic beverages	<input type="checkbox"/>	<input type="checkbox"/>	
Serving or selling food?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Sold <input type="checkbox"/> Free
Sales vendor(s)	<input type="checkbox"/>	<input type="checkbox"/>	#
Information booth(s)	<input type="checkbox"/>	<input type="checkbox"/>	#
Garbage Cans	<input type="checkbox"/>	<input type="checkbox"/>	#
Recycle bins	<input type="checkbox"/>	<input type="checkbox"/>	#
Picnic table(s)	<input type="checkbox"/>	<input type="checkbox"/>	#
Tent(s) Indicate the # and size of tent(s)	<input type="checkbox"/>	<input type="checkbox"/>	
Locates (ex. Anchoring, grounding of electrical)	<input type="checkbox"/>	<input type="checkbox"/>	
Electricity? Note: City electrical access is subject to availability in the park and/or building.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Onsite Electrical <input type="checkbox"/> Generator
Lottery/raffle	<input type="checkbox"/>	<input type="checkbox"/>	
Bouncy Castle or Amusement Rides	<input type="checkbox"/>	<input type="checkbox"/>	
Fireworks or Pyrotechnics	<input type="checkbox"/>	<input type="checkbox"/>	
Amplified Sound (iPod/live/megaphone/DJ etc.)	<input type="checkbox"/>	<input type="checkbox"/>	
Staging & production (please specify)	<input type="checkbox"/>	<input type="checkbox"/>	
Sound Tech Staff Requested Onsite (i.e. for live band)	<input type="checkbox"/>	<input type="checkbox"/>	Tech Start & End Times:
Permanent Sound & PA System (Harmony Square only. Note: only for events without sound tech staff)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Microphone <input type="checkbox"/> Plug in your iPod
Splash Pad Closure Request (Harmony Square only)	<input type="checkbox"/>	<input type="checkbox"/>	Closure & Reopen Times:
Portable Washrooms/Hand Wash Stations	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Accessible Units and # _____ <input type="checkbox"/> Regular Units and # _____ <input type="checkbox"/> Hand Wash Stations and # _____ <input type="checkbox"/> Cleanouts Requested
Emergency Medical Services (identify EMS provider)	<input type="checkbox"/>	<input type="checkbox"/>	
Security	<input type="checkbox"/>	<input type="checkbox"/>	
Police Involvement (please specify)	<input type="checkbox"/>	<input type="checkbox"/>	
Road closure/traffic control (ex. barricades, pylons)	<input type="checkbox"/>	<input type="checkbox"/>	

A DETAILED SITE MAP IS REQUIRED AT TIME OF SUBMISSION

Additional event details (ex. Schedule of events, details of event, written routes etc.): _____

NOTE: Personal information on this form is collected under the authority of section 10(1) of the Municipal Act, 2001, as amended and will be used solely to contact persons making application for a Special Event Permit with the City of Brantford.

Questions about this collection should be directed to the Director of Parks Services, 1 Sherwood Drive, Brantford, ON N3T 1N3, (519) 756-1500.

OFFICE USE ONLY SEAT Meeting Date: _____