



## TOWN GREEN SPECIAL EVENT PERMIT APPLICATION

Please return to:  
 Vienna Parks and Recreation Department  
 127 Center Street S  
 Vienna, VA 22180

*A nonrefundable application fee of \$25 for in-Town non-profit organizations, \$50 for those outside of Town limits is required with the completed application form.*

*All applications will be processed by Vienna Parks and Recreation, Vienna Police Department, and, when applicable, Town Manager.*

*Please review provided checklist for the Special Event Permit Application*

**Activity:** \_\_\_\_\_ **Date of Application:** \_\_\_\_\_

**Anticipated number of participants:** \_\_\_\_\_ **Non-Profit Organization:** \_\_\_\_\_

**Tax Exempt:** Number: \_\_\_\_\_ (Enclose Tax Exempt letter)

**Date of Event:** (No rain date may be scheduled)

1<sup>st</sup> Choice \_\_\_\_\_ Event Hours: \_\_\_\_\_ Set-up Start: \_\_\_\_\_ Clean- up: \_\_\_\_\_

2<sup>nd</sup> Choice \_\_\_\_\_ Event Hours: \_\_\_\_\_ Set-up Start: \_\_\_\_\_ Clean- up: \_\_\_\_\_

**Organizers/Contact: (Name of the person who will be in charge and onsite throughout the event.)**

Name: \_\_\_\_\_

Home #: \_\_\_\_\_ Cell # \_\_\_\_\_

Which number is best to reach you? \_\_\_\_\_

Address: \_\_\_\_\_ City/Town: \_\_\_\_\_ State: \_\_\_\_\_ Zip \_\_\_\_\_

Email Address: \_\_\_\_\_

**Description and Purpose of Event (attach separate sheet if necessary):**

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You will be asked to provide additional information as needed related to parking, security, insurance certificate, street closures, signage, restrooms, vendors, water and electrical hook-ups, Safety plans and layout sketch.

**By signing an Application, and accepting a Permit if issued, applicants shall be required to indemnify and hold harmless the Town, its elected and appointed officials, employee and agents from and against any claims arising from personal injury, death and damages to property, and any other loss and/or damage resulting**

from the Special Event. Further, applicants agree that they will accept the venue/location in its “as-is, where-is” condition, and that they understand that by reviewing and approving the application, and issuing a Permit, the Town does not represent and warrant that any public areas are suitable for the Special Event. The applicant must furnish a Certificate of Insurance on a general liability insurance policy, protecting the Town, its elected and appointed officials, employees and agents from and against any and all claims which may result from or in connection to the Special Event. The Town of Vienna must be named as an 'Additional Insured' on the certificate. Applicants must produce a copy of the policy with all endorsements. The Town’s Parks and Recreation Director or designee must receive the certificate at least fifteen (15) days prior to the Special Event. Limits of insurance are generally \$1,000,000.00 for death or bodily injury and property damage. Limits and types of insurance may change because of the different activities of each Special Event. Failure to timely produce a valid Certificate of Insurance naming the Town as an additional insured, with coverages as requested by the Town’s Risk Manager, will result in cancellation of the Special Event and/or revocation of any issued Permit.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

LAYOUT ATTACHED: Y N

EVENT PLAN ATTACHED: Y N

**Planning and Zoning Review: Layout and Event Plan Approval:**

Vienna Parks and Recreation Review	Vienna Police Department Review
Event Reviewed w/Applicant <input type="checkbox"/> Yes <input type="checkbox"/> No	Approved <input type="checkbox"/> Yes <input type="checkbox"/> No
On Site Staff Required <input type="checkbox"/> Yes <input type="checkbox"/> No	Police Support: # of officers _____
Staff Support Fees ___ #hrs @\$45 \$ _____	Total # Hours ___ @\$55/hr per officer \$ _____
Equipment Fees \$ _____	Minimum 4 hours
Event Fee/hr \$35 intown/\$75out of town \$ _____	Recommend Approval: _____/_____
Security Deposit \$ _____	Vienna PD / Date
Recommend for Approval _____ Date _____	Sent back to PR: Date _____
Forward to Police (Date) _____	