

EVENT PERMIT APPLICATION FORM (1A)

(Application to hold a stationary event held at venue other than in a City Park)

Date submitted: _____ Name of Event: _____

Name of Organization: _____ Phone: _____

Contact Name: _____ Bus. Phone: _____

Mailing Address: _____ Cell: _____

Postal Code: _____ Email: _____

Alternate Contact: _____ Phone: _____

Event is not approved until all documents are received and details confirmed.**Submission of application does not guarantee approval of event.**Date(s) Requested: _____ Hours of Use: _____
(include setup/teardown times)

Facility/Facilities Requested: _____

Purpose of Use: _____

Anticipated Number in Attendance: _____ Anticipated Number of Spectators: _____

*If applicable, please provide list of any other groups coming under the umbrella of this event.*Road Closure Requested: Yes ☐ No ☐ Details: _____

Concession Requested: Yes ☐ No ☐ (Subject to Food Concession Policy 3.18)**Electrical Service Required?** _____**Please note** the City is not responsible
to provide extension cords.

If your event requires **gate or electrical access key(s)**, contact the Special Events Coordinator to arrange pickup. Keys can be collected from the Administration Department, 100 Jensen Avenue East, during regular office hours. **\$50 deposit** is required and will be refunded upon return of key(s). All callout costs incurred by the City, including provision of keys after regular office hours, will be the responsibility of the organizer(s).

Organizer(s) will be responsible for damages to irrigation systems.**All event applications must include the Terms and Conditions form. Signature required prior to submission for consideration.**

City of Parksville Office Use: City Approval: ☐ Yes ☐ No Date: _____