



# City of Grosse Pointe Park

## Application for Special or Street Event

THIS APPLICATION IS INTENDED FOR OUTDOOR EVENTS WITHIN BUSINESS AND MIXED-USE DISTRICTS OR PUBLIC EVENTS HELD AT CITY FACILITIES AND GROUNDS

Submit completed application to [clerk@grossepointepark.org](mailto:clerk@grossepointepark.org) no less than 60 days prior to the event

Name of Organization: \_\_\_\_\_

Address: \_\_\_\_\_ Phone: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Contact Person: \_\_\_\_\_ Phone: \_\_\_\_\_

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

Event Name / Title: \_\_\_\_\_

Description of Event / Activity: \_\_\_\_\_

Location(s) of Activity: \_\_\_\_\_

Date(s) of Activity: \_\_\_\_\_ Alternate Date: \_\_\_\_\_

Time period (including pre-street closure time): \_\_\_\_\_

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

### **REQUIRED: ATTACH LAYOUT SKETCH INCLUDING LOCATION OF ANY TENTS/STRUCTURES**

Check all that apply:

- |  |   |  |
|--|---|--|
| <input type="checkbox"/> Street Closing            | <input type="checkbox"/> Liquor License | <input type="checkbox"/> Vendors         |
| <input type="checkbox"/> Barricades/Traffic Cones* | <input type="checkbox"/> Parking Spaces | <input type="checkbox"/> Traffic Control |
| <input type="checkbox"/> Public Safety*            | <input type="checkbox"/> Electricity*   | <input type="checkbox"/> Street Banners  |
| <input type="checkbox"/> Portable Restrooms**      | <input type="checkbox"/> Water Service* | <input type="checkbox"/> Fencing         |
| ** (NOT PROVIDED BY CITY)                          |   |  |
| <input type="checkbox"/> Other _____               |   | *FEES APPLY                              |

1. A permit, if issued, must be displayed. The permit is subject to revocation for cause.
2. If food or beverages are to be sold or served, evidence of Health Department approval is required.
3. Evidence of General Liability Insurance with City of Grosse Pointe Park listed as additional insured.
4. Costs incurred by the City may be passed on to event organizers at the discretion of City Council.

### FOR CITY USE ONLY

DEPARTMENT REVIEW	DETERMINATION	SIGNATURE
CITY MANAGER	APPROVE ___ DENY ___	
PUBLIC SAFETY	APPROVE ___ DENY ___	
DPW	APPROVE ___ DENY ___	
BUILDING	APPROVE ___ DENY ___	
OTHER: _____	APPROVE ___ DENY ___	

**EVENTS WHICH DO NOT INCUR COSTS TO THE CITY MAY BE ADMINISTRATIVELY APPROVED.**

COUNCIL REVIEW DATE: \_\_\_\_\_ OUTCOME: \_\_\_\_\_

THIS EVENT IS APPROVED \_\_\_ YES \_\_\_ NO APPLICANT ADVISED ON DATE: \_\_\_\_\_