SPECIAL EVENT APPLICATION

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FOR OFFICE USE ONLY

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ALL PAGES OF THIS APPLICATION MUST BE SUBMITTED ALONG WITH THE APPLICABLE APPLICATION FEE(S) AND ADDENDUM(S) IN ORDER FOR IT TO BE DEEMED COMPLETE. *MANDATORY FIELDS ARE INDICATED BY AN ASTERISK

EVENT NAME*:						
EVENT DATE(S)*	START DATE*	END DATE*	EVENT HOUR(S)*:	START TIME*	END TIME*	
APPLICANT NAME/AUT	HORIZED AGENT*:					
ORGANIZATION/BUSIN	ESS NAME*:					
ORGANIZATION/BUSIN	ESS TYPE*: 🖵 FOR		FIT - TAX ID #:			
ORGANIZATION/BUSIN	ESS ADDRESS*:					
	Street / P.O. Be		City	State	Zip	
ORGANIZATION/BUSIN	ESS PHONE*:		FAX: _			
PRIMARY CONTACT*:						
PRIMARY CONTACT PH	IONE*:					
E-MAIL*:						
EVENT DAY "ON-SITE" CONTACT*:MOBILE*:						
EVENT INFORMATION	HOTLINE (if available)	:				
WEBSITE (if available):						
			APPLICATION FEES (CH TREET FUNCTION: \$61.03			
All application fees must be in the form of <u>cash**</u> , <u>money order or</u> <u>cashi er's check</u> payable to the City of Houston. <u>**Only exact change will be accepted.</u>						
PLEASE NOTE: If you are submitting an application for a Non Revenue Generating Parade you have the option to submit an affidavit of inability to pay. Please contact the Mayor's Office of Special Events for more information.						
An application is not considered complete unless all applicable questions have been answered and all attachments included in accordance with Sec. 25-107 and any other documentation required by the Mayor's Office of Special Events. Submission of a Special Event Application does not guarantee event approval.						
NLY						
FOR OFFICE USE ONL	Mayor's Office of Special Events accepts applications between the hours of 8:00 a.m. and 5:00 p.m. Monday through Friday, except for City-observed Holidays. Contact us: 832-393-0868					
LCE LCE	U U EVENT TYPE*: PLEASE CHECK ALL THAT APPLY*:					
OFF	BLOCK PARTY CURB LANE CLOSURE DEMONSTRATION/EXPRESSIVE ACTIVITY/RALLY					
OR	G FESTIVAL/FAIR G MARKETING/PROMOTION G PRESS EVENT G PRIVATE EVENT					
ш		REVENUE-GENERAT	ING PARADE 🛛 NON RE	VENUE-GENERATING	PARADE	
I	RUN/WALK/BIK	E/SKATE TV/FIL	M SHOOT 🛛 OTHER (DE	ESCRIBE)		
I		FOR OF	FICE USE ONLY			
Received By:				Date:		
Receipt No(s):			Application Fee(s)	Amount Paid: \$		

EVENT INFORMATION: (To be completed by ALL Applicants)

	TIME*	DATE*		TIME*	DATE*	
SET-UP / TAKE-DOWN FROM*			THROUGH*			
	Please list the proposed event location and attach a map of the proposed logistical layout for your event: Is this location is the proposed logistical layout for the proposed layout for the proposed logistical layout for the proposed layout for proposed layout for the proposed layout for the proposed layout f					
EVENT LOCATION*	Park					
EVENT PARKING*	WHAT PARKING ARRANGEMENTS HAVE BEEN MADE FOR THE EVENT? (If you are using alternate parking lots for event parking, a letter of approval from the property owner must accompany this application) EVENT SET-UP:					
	EVENT PARTICIPANTS (Production Trailers, Media Vehicles, Vendor Vehicles, Volunteers):					
	EVENT ATTENDEES:					
STREET PARKING*	ARE YOU REQUESTING THE USE OF A PARKING LANE(S) FOR YOUR EVENT? Yes No (If you are requesting street parking for your event during peak or non-metered hours you may also need to complete the "Street Function" portion of this application; the applicable application fee for a Street Function would also apply)					
EVENT SIZE*	TOTAL Attendees Expe	cted*: # of Part	icipants/ Spectators:	# of Staff/Volunteers:		
	Has this event been pro before*?	duced Has the Event P	s event previously received an ermit from the City of Houston*?	Is this an Ar	nnual Event*?	
			C Yes	Yes 🖵 No		
	Previous Name(s) of Event:					
Are there any changes from previous years?	Previous Location(s) of the Event:					
Yes No	Describe Changes: Previous Mayor's Office of Special Events - Event Coordinator (Name):					
	If open to the public, please	se check all advertis	ement methods you plan to utilize	9:		
EVENT PROMOTION	Print TV Radio Internet Billboards Posters Other:					
	Briefly describe the scope	of your event (attac	h detailed proposal- for new, larg	ger scale events)*:		
	/ENT SCOPE*					
EVENT SCOPE*						

	PLEASE CHECK ALL STRUCTURAL ELEMENTS THAT APPLY:				
STRUCTURES	TENT(S) BOOTH(S) TABLE(S) CHAIR(S) STAGE(S) FENCING POWER GENERATOR				
	PLEASE CHECK ALL UTILITY ELEMENTS THAT APPLY:				
UTILITIES	ELECTRICITY WATER PROPANE/FLAME** POWER GENERATOR **Additional City of Houston Permitting will apply.				
	PLEASE NOTE: If you are requesting the use of a City of Houston Park, please be sure to check availability of the above with your assigned Event Coordinator.				
	(Please reference Permit Fee Guide for cost breakdown)				
	PLEASE CHECK ALL ENTERTAINMENT ELEMENTS THAT APPLY:				
ENTERTAINMENT	AMPLIFIED SOUND/PA SYSTEM** PERFORMER(S) BAND(S) INFLATABLE(S) CHILDREN ACTIVITIES **Additional City of Houston Permitting will apply.				
	PLEASE INDICATE THE NUMBER OF PORTABLE TOILETS YOU WILL HAVE AT YOUR EVENT:				
PORTABLE TOILETS	REGULARADA ACCESSIBLE				
	(At least 10% of the portable toilets must be ADA accessible)				
EVENT CLEAN-UP	NAME: MOBILE:				
	PLEASE DESCRIBE YOUR RECYCLING PLANS FOR THE EVENT:				
EVENT RECYCLING					
EVENT RECTCLING					
	PLEASE CHECK ALL FOOD/BEVERAGE ELEMENTS THAT APPLY:				
	SALE OF FOOD/BEVERAGES**				
FOOD/BEVERAGES	USALE OF FOOD/BEVERAGES** U DISTRIBUTION OF FOOD/BEVERAGES**				
FOOD/BEVERAGES	□ SALE OF ALCOHOLIC BEVERAGES** □ DISTRIBUTION OF ALCOHOLIC BEVERAGES**				
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STREET FUNCTIONS: (*To be completed by Street Function Applicants*)

OTHEETTOHO						
STREET/LANE CLOSURE FROM*:	TIME*	DATE*	THROUGH*	TIME*	DATE*	
STREET CLOSURES*	PLEASE LIST THE STREET CLOSURES REQUESTED FOR YOUR EVENT (MAP REQUIRED)*: (For partial street or lane closures please indicate what lane(s) you are requesting)					
METERED PARKING	IS A FREEWAY RAMP/STATE RIGHT-OF-WAY CLOSURE REQUESTED? Yes No If yes, please identify entrance/exit closure(s) and include the proper documentation (i.e. Freeway Ramp Closure TXDOT form 1560; Insurance Certificate; and a Traffic Control Plan). Information must be submitted at leprior to event. METERED PARKING ARE THERE METERED SPACES WITHIN YOUR PROPOSED STREET CLOSURE? Yes No If yes, please Indicate where: If yes, please Indicate where: Yes No					
	Street:	Block:	Both Side	es 🛛 North 🖵 South 🗖	East 🖵 West	
	Street:	Block:	Both Side	es 🛛 North 🖵 South 🗖	East 🖵 West	
	Street:	Block:	Both Side	es 🛛 North 🖵 South 🖵	East 🖵 West	
TRAFFIC CONTROL SERVICES*	(CHECK ONE): Contracting with a p phone number of the c ten (10) business days Contact: Reimbursing the C remove the traffic con	private contractor to pro ontractor as well as a <u>c</u> prior to the event. ity of Houston Public \ es, barricades and sign	ertified traffic control plan (a Company: Norks and Engineering Denage. If the PWE director	s. The applicant will subm as provided by the contra epartment employees, as determines that the city	nit the name, address and actor) to the MOSE at least	
EMERGENCY	resources and personnel necessary to deploy the appropriate traffic control devices for the proposed street function, the applicant agrees to provide to the MOSE payment to cover the cost at least ten (10) business days prior to the proposed street function date. (INITIAL): By initialing here, the applicant/authorized agent agrees to conduct the function in such a manner that at					
EMERGENCY VEHICLE ACCESS*	Teast one lane of the street(s) to be utilized will be capable of being opened at all times for access by persons requiring emergency access to properties abutting the function and by police, fire, ambulance and other such emergency vehicles.				cess by persons requiring	
EVENT NOTIFICATION*	(INITIAL): By initialing here, the applicant/authorized agent understands that he/she may be required serve notices to residents and/or businesses in and around the area where the event will be conducted and to furnish evidence thereof to the director. PLEASE NOTE: If your closure impedes access to any businesses or residences within your closure, you must submit written approval/notification letters to the MOSE with this application.					

PARADES: (To be completed by Parade Applicants)

	PARADE START TIME*:				
TYPE OF PARADE*	REVENUE-GENERATING: Any parade for which a participation fee is charged or for which cash is accepted or colle as sponsorship in support of the proposed parade.				
	□ NON-REVENUE-GENERATING: Any parade for which no collected as sponsorship in support of the proposed para	participation fee is charged or for which no cash is accepted or ade.			
PARADE ROUTE*	PLEASE LIST THE PARADE ROUTE (MAP REQUIRED)*:				

	IS A FREEWAY RAMP/STATE RIGHT-OF-WAY CLOSURE REQUESTED? Yes No If yes, please identify entrance/exit closure(s) and include the proper documentation (i.e.: Freeway Ramp Closure Application; TXDOT form 1560; Insurance Certificate; and a Traffic Control Plan). LIST THE STREET(S) TO BE USED FOR PARADE STAGING*: (If you are using alternate areas for parade staging, a written approval from the property owner must accompany this application)					
STAGING*						
		BETWEEN	AND			
		BETWEEN	AND			
		BETWEEN	AND			
DISBANDING* LIST THE STREET(S) TO BE USED FOR PARADE DISBANDING*: (If you are using alternate areas for parade disbanding, a written approval from the property own this application)				the property owner must accompany		
		BETWEEN	AND			
		BETWEEN	AND			
		BETWEEN	AND			
METERED PARKING	ARE THERE METERED SPA	CES WITHIN YOUR PROPOSI se Indicate where):	ED ROUTE, STAGING C	OR DISBANDING AREAS?		
	Street:	Block:	Both Sides	□ North □ South □ East □ West		
	Street:	Block:	Both Sides	North South East West		
	Street:	Block:	Both Sides	□ North □ South □ East □ West		
	ESTIMATED NUMBER OF PARADE PARTICIPANTS*: ESTIMATED NUMBER OF PARADE SPECTATORS*:					
	ESTIMATED NUMBER (IF ANY) OF THE FOLLOWING THAT WILL PARTICIPATE IN THE PARADE:					
PARTICIPANTS*	Animals:					
	Exotic Animals:					
	Motor Vehicles:					
	Motorized Displays (Floats):					
	Marching Units or Organizations (Bands, Color Guards, Drill Teams):					
EVENT NOTIFICATION*				he/she may be required serve notices to ted and to furnish evidence thereof to the		
complete unless al 107 and any othe Application does no all applicable requis	I applicable questions ha r documentation required of guarantee event appro sites have been met as de	ve been answered and a d by the Mayor's Office val; a final permit will not etermined by the Mayor's	all attachments inclu of Special Events. t be issued until all a	his application is not considered ided in accordance with Sec. 25- Submission of a Special Event approvals have been granted and vents.		
l,	(Print Applica			_, am the authorized agent for,		
	(Print Applica	nt Name/Authorized Agent*)				
				_, and am capable of making		
	(Print Organiz	ation/Business Name*)				
decisions entering	into any and all agreemer	nts on behalf of the above	entity.			
AUTHORIZED SIGN	ATURE*:			DATE*:		