

CITY OF RAMSEY

APPLICATION FOR
2017 TEMPORARY SPECIAL EVENTS PERMIT

Date: _____

Application is hereby submitted for a temporary special events permit within the City of Ramsey, in accordance with the Ordinances of said city regulating the same. This application must be submitted a minimum of 30 days prior to the event requested.

Return this completed application along with the following:

- a \$50 application fee. (There may be an additional fee based upon the type of event and the City's adopted rates and charges.)
A certificate of insurance for public liability

Please check the following that best describes you and all that apply:

- Business Sole Owner Partnership
Association Non Profit For Profit
Individual

List partners, if more room is needed, please list on back

1. FULL Name of Business/Association/Individual: _____

2. Address or General Description of the premises to be licensed: _____

3. Applicant's FULL Name: Last First Middle Name

4. Applicant's Phone Number(s): () ()

5. Applicant's Email Address: _____

6. Applicant's Address: _____

7. Applicant's Date of Birth: _____

8. Applicant's Position with Company: _____

9. Manager or Owner's FULL Name: (If diff fm applicant) Last First Middle

10. Address of Owner of Premises: (If different from applicant) _____

11. Owner's Phone Number(s): (If different from applicant) () ()

12. Brief description of event (use back of sheet if more space is needed): _____

13. Will there be music: Please check all that apply.
None Live Band DJ Karaoke Other: _____

14. Will there be alcohol – if yes – Explain: _____

15. Days/Date of Event: _____

16. Hours of Event: _____

17. An estimated number of persons and spectators expected to attend the event on each day it is conducted:

18. Details of the program: ***Include a map (Google earth, etc.) showing the locations of all facilities and equipment on the premises, including the location of loud speakers, toilets, medical facilities, solid waste receptacles, emergency routes, etc, along with a brief summary of each one listed below:***

a) Emergency Communication: _____

b) Security Protection: _____

c) Water & Food Supply: _____

d) Medical Facilities and Services: _____

e) Vehicle Parking Space(Parking provisions for employees and visitors): _____

f) Vehicle Uses and On-Site Traffic Control – including showing **emergency accesses:** _____

g) Sound and Lighting Equipment: _____

h) Fire Protection Plan: _____

i) Garbage/Trash & Litter Clean-up Service: _____

- j) Is it proposed or expected that spectators or participants will remain at night or overnight, the arrangements for illuminating the premises and for camping and similar facilities must be summarized:

19. The applicant agrees that within 24 hours after the conclusion of the event, the premises will be cleaned up, including contiguous public roads, ways and easements, and remove all debris, garbage, trash, litter and other waste matter from, in and around said premises, together with all advertising matter to said event.
20. If severe weather is approaching, it is the permittee's responsibility to notify those attending and take appropriate action.
21. If applicant is different from the property owner, a notarized letter by the property owner acknowledging and accepting the temporary use on the property must accompany this permit application.
22. Special events **require a fire inspection** – call 763-427-4452 to schedule. This application **does not** cover permits needed for cooking vendors, tents over 400 square feet, the use and storage of flammable/combustible liquids, fireworks, etc.
23. The City of Ramsey does not give out food handling permits – that is done through Anoka County (763-421-4760),

I hereby certify that the foregoing statements are true and correct to the best of my knowledge and that the giving of false information or the failure to give pertinent information constitutes cause for revocation of this permit. Further, I agree to comply with all the provisions of the ordinance under which this permit is granted.

Applicant's Signature: _____

Date: _____

***Return completed application and requested information along with the fee to: Jo Thieling, City Clerk, City of Ramsey, 7550 Sunwood Drive NW, Ramsey, MN 55303
Phone: 763-433-9840 Fax: 763-433-9898***

Make check or money order payable to "City of Ramsey"

OFFICE USE ONLY:

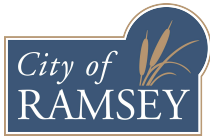
Approved By/Date _____

License Fee _____

Receipt No. _____

License No. _____

DATA PRACTICES ADVISORY: *The data supplied in this application will be used to assess the qualifications for a license. This data is not legally required but the City will not be able to grant the license without it. If a license is granted, the data will constitute a public record.*



CITY OF RAMSEY

TENNESSEN WARNING

In connection with your request for a license, the City of Ramsey has asked that you provide information about yourself which is classified as either *private or confidential* by the Minnesota Government Data Practices Act (M.S.A. 13.04). Accordingly, the City is required to inform you of the following:

1. The private or confidential information requested includes, but may not necessarily be limited to, the following: *Your social security number or Minnesota business identification number.*
2. The purpose and intended use of the information requested is: *To comply with Minnesota Statutes, Section 270.72.*
3. You are required to supply the requested information.
4. The known consequences of supplying the requested information are as follows: *Loss or denial of the requested license if you owe the State of Minnesota delinquent taxes, penalties or interest.*
5. The known consequences of refusing to supply the requested information is: *Your request for a license cannot be processed.*
6. The following persons and entities are authorized by law to receive the information if provided: *State of Minnesota - Department of Revenue and other government agencies as provided by law.*

The undersigned, by signing this notice, acknowledges that he/she has read and understood the contents of this notice.

Date

Signature of Applicant

Print Name