



Special Event Permit Application

P.O. Box 1479, Pelham, Alabama 35124 | 205.620.6453
zoning@pelhamalabama.gov

Name of Organization/Event: _____

Contact Name: _____

Contact Email: _____

Manager on site day of the event: _____ Phone: _____

Event Date: _____ Event Time: _____

Address of Event: _____ Estimated Attendance: _____

Will the event be hold on City-owned property? ___ Yes ___ No

If yes, a Certificate of Insurance is required. The City of Pelham must be listed as an additional insured.

TYPE OF EVENT

___ Open Air Outdoor Sale Event

___ Expand Outdoor Dining

___ Sidewalk Sale

___ Current Number of Outdoor Seating

___ Other _____

___ Proposed Number of Outdoor Seating

PLEASE INDICATE WHETHER THE FOLLOWING ITEMS PERTAIN TO YOUR EVENT

Yes No

___ ___ Food Concession and/or Food Preparation Area(s)

___ ___ Do you intend to cook food in the event area:

___ ___ Please Specify Method: ___ Gas ___ Electric ___ Charcoal ___ Other:

___ ___ Traffic Control Devices

___ ___ Alcohol Sales/Service

___ ___ Security

___ ___ First Aid Facility(ies) & Ambulances(s)

___ ___ Will you set up table(s) and/or Chair(s) How Many? _____

___ ___ Canopy(ies) and/or Tent(s). Please include dimensions: _____

___ ___ Trash Container(s) and/or Dumpster(s)

___ ___ Portable Toilet(s) If yes, please indicate company providing units: _____

___ ___ Inflatable Device(s), Amusement(s)

REQUIRED INFORMATION

- Layout of proposed event
- Details of vehicular barrier proposed as protection
- Information of parking changes/ADA required spaces
- Full occupancy load of establishment
- List of all vendors participating in event
- Written permission of the property owner

SPECIAL EVENT PERMIT APPLICATION

EACH APPLICATION WILL BE EVALUATED FOR CURRENT ZONING REQUIREMENTS, SPECIAL OVERLAY DISTRICT REQUIREMENTS, REQUIRED PARKING, ETC. IF THIS APPLICATION IS FOR OUTDOOR DINING, THIS DOES NOT PERMIT CHANGES IN ABC LICENSE REGULATIONS. VEHICULAR BARRIER REQUIRED. FLAGS, ROPE, ETC. WILL NOT BE ACCEPTED. TENTS REQUIRE A SEPARATE PERMIT APPLICATION.

SEVEN (7) DAY NOTIFICATION REQUIRED. INSPECTION BY CITY STAFF MUST BE PERFORMED PRIOR TO EVENT AND APPROVAL OBTAINED. APPLICANTS FOUND TO BE IN VIOLATION WILL BE SUBJECT TO A CITATION.

Signature of Applicant

Date

OFFICE USE ONLY

Event Held on City owned Property: ____ Yes ____ No

Certificate of Insurance Received: ____ Yes ____ No

City Facility: _____

City Facility Authorization: _____ Date: _____

APPROVALS

Zoning - S. Proctor _____ Date: _____

Police Dept. - P. Cheatwood _____ Date: _____

Fire Department - M. Reid _____ Date: _____

City Clerk - T. Seale _____ Date: _____