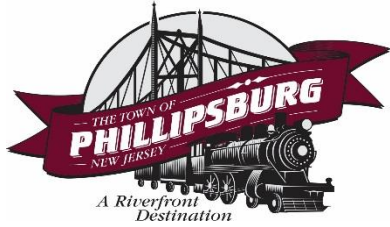


Payment Method:

Amount Received:

Date Received:



TOWN OF PHILLIPSBURG
120 FILMORE STREET
PHILLIPSBURG, NJ 08865
 PHONE: 908-454-5500 FAX: 454-6511

Special Event Application

Permit (short form-for 100 or less attendees):

Special Use Permit (Town of Phillipsburg) Application

*Please print/type the following application and return it with the non-refundable application fee made payable to "Town of Phillipsburg" **at least 45 days prior to the requested date.** *Non Commercial Application fee is \$25 for Phillipsburg residents, and \$50 for out of town residents. Commercial application fee is \$75 for Phillipsburg residents and \$100 for out of town residents. Contact the Town of Phillipsburg with any questions, pertaining to this application or process. At the Town's discretion, an additional Operations Plan may be required, depending on complexity of request. This SUP request is not fully approved until a Town authorized **Special Use Permit**, is issued and signed by all required parties.*

Requested Venue : _____

Type of Program/Event: _____

Date & Time of use: (Date) _____ **(Start/Time)** _____ **(End Time)** _____

Applicant(s) Name: _____

Company/Organization: _____

Street Address: _____

City/Town: _____ **State:** _____ **Zip Code:** _____

Telephone/Contact #'s: (Home, Bus.) () _____ **(Cell)** () _____

FAX #: _____ **Email Address (REQUIRED):** _____

Estimated Attendance: _____ **Estimated * of Vehicles:** _____

Payment Method:

Amount Received:

Date Received:

Please Check Yes (Y) or No (N) to answer the following questions

Have you completely read and understand the SUP Application Pack? Y N

Are you familiar with the site? Y N

Will there be any fees charged? Y N

Will you offer food for sale? Y N

Will any items/goods be for sale? Y N

Does request include commercial photography? Y N

If YES: (Still Video Movie)

Will you be requesting assistance of: Maintenance: Y N Police/Security: Y N

Parking: Y N Water/Electric Connection: Y N

Early or Late Open/Close: Y N

Please make a selection and check off the appropriate box below that your classification:

____ Individual or non-profit; Town resident [\$ 25.00] ____ Individual or non-profit; Non-resident [\$50.00]

____ Commercial; Town resident [\$ 75.00] ____ Commercial; Non-resident [\$100.00]

In the space provided below give a brief description of your proposed special use or event and give further explanation to any questions above, in which you checked/answered Yes (Y). Also, please describe any special needs you may have.

Payment Method:
Date Received:

Amount Received:

Applicant agrees to provide a Certificate of Insurance naming the Town of Phillipsburg, 675 Corliss Avenue, Phillipsburg, NJ 08865 as additional insured. Applicant additionally agrees to indemnify, defend and hold harmless the Town of Phillipsburg from and against any and all liabilities, losses, claims, damages and expenses incurred in connection with the Event, including but not limited to, costs of investigation and defense, legal fees and expenses of any kind or nature whatsoever to the extent that such damages are not caused by the gross negligence, willful misconduct, fraud or misrepresentation of the Town of Phillipsburg.

The applicant by his/her signature certifies that: 1.) All information is correct. False information will result in denial or revocation of permit. 2.) All Town rules and regulations pertaining to use of area are understood and will be fully complied with by the applicant. 3.) Applicant will not discriminate on the basis of race, color, religion, sex, national origin, age, or disability.

Name of Applicant: _____

Signature of Applicant: _____ **Date:** _____

FOR TOWN USE ONLY

Town Approved: ___ Yes ___ No ___ **Department Manager** _____

Mayor Approved: Yes ___ No ___ **Conditional** ___ **Signature:** _____

Comments/Explanation of Conditional Approval:

THIS PERMIT MUST BE WITH YOU AT ALL TIMES DURING YOUR EVENT!

Payment Method:
Date Received:

Amount Received: