



# STANDARD SPECIAL EVENT PERMIT APPLICATION

RETURN TO: CITY OF DURHAM POLICE DEPARTMENT  
SPECIAL EVENT PERMIT COORDINATOR  
3022B FAYETTEVILLE STREET, DURHAM, NC 27707  
(919) 560-4974, EXT 29277 OR [SPECIALEVENTS@DURHAMNC.GOV](mailto:SPECIALEVENTS@DURHAMNC.GOV)

Date Application Submitted: \_\_\_\_\_

Event Date(s): \_\_\_\_\_

Street Closure Notification Form & Signature Sheets submitted

The City of Durham and other agencies, government or private, may require other permits, security services or equipment for the event. Acquisition of these permits, services and equipment is the Event Coordinator's responsibility and may require additional forms. **Please consult the City of Durham Special Event Guidelines for more information.**

## EVENT DESCRIPTION AND CONTACT INFORMATION

Event Name: \_\_\_\_\_

Rain Date: \_\_\_\_\_ Location: \_\_\_\_\_

Please describe your event: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

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

Telephone: \_\_\_\_\_ Website: \_\_\_\_\_

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

Event Coordinator Name: \_\_\_\_\_

Title: \_\_\_\_\_

Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_

Cell Phone Number (onsite during event hours): \_\_\_\_\_

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

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

Non-profit must attach copy of 501(c)3 status

## GENERAL EVENT INFORMATION

### Type of event (check all appropriate):

- Assembly       Concert       Festival       Race (Bike)       Car Show
- Race (Foot)       Rally       Parade       Walk-a-thon

*Note: A map of your event and/or your proposed route (including assembly and disbanding areas) must be attached to this application.*

### Please check any special activities that apply to your event:

- Amusement Rides       Dunk Tanks       Inflatables       Mobile Stages
- Petting Zoos       Pony Rides       Other: \_\_\_\_\_

Please fill in below with all requested date(s) and time(s):

	Starting Date	Starting Time	Ending Date	Ending Time	Day(s) of Week
Setup					
Event					
Breakdown					

Is your event open to the general public?  Yes  No

Is this a fund raising project?  Yes  No

Is this the first time you are holding this event?  Yes  No

If this is not a new event, how does it differ from previous years? \_\_\_\_\_

**Total number of expected participants (volunteers, walkers, etc.) and spectators anticipated:**

Daily: \_\_\_\_\_ Overall Total: \_\_\_\_\_

If applicable, attendance totals for last event:

Daily: \_\_\_\_\_ Overall Total: \_\_\_\_\_

### POLICE DEPARTMENT

Will any public streets need to be fully or partially closed or blocked off?  Yes  No

If no, will any sidewalks be closed or blocked off?  Yes  No  N/A

Please describe requested street/sidewalk closures OR attach a detailed map and turn-by-turn directions:

\_\_\_\_\_ between \_\_\_\_\_ and \_\_\_\_\_  
*(Street)* *(Street)* *(Street)*

\_\_\_\_\_ between \_\_\_\_\_ and \_\_\_\_\_  
*(Street)* *(Street)* *(Street)*

\_\_\_\_\_ between \_\_\_\_\_ and \_\_\_\_\_  
*(Street)* *(Street)* *(Street)*

\_\_\_\_\_ between \_\_\_\_\_ and \_\_\_\_\_  
*(Street)* *(Street)* *(Street)*

Will security services be needed (required when alcohol is served)?  Yes  No

*Reminder: If yes, contact Secondary Employment Coordinator (see Special Event Guidelines)*

Will other police services be requested (traffic/parking direction, route layout, etc.)?  Yes  No

*Reminder: If yes, contact Secondary Employment Coordinator (see Special Event Guidelines)*

### FIRE DEPARTMENT

#### Tent Inspections

Will you have tents?  Yes  No

Will any of the tents be over 400 sq. ft.?  Yes  No  N/A

*Reminder: If yes, contact Chief E. Reid – Fire Marshal (see Special Event Guidelines)*

EMS Personnel

**What are your plans for providing emergency medical services?** (choose one)

- We are requesting the City to provide EMT services.
- This is a small event and we will call 911 if needed.
- We plan to use a private EMS company or other Health Services.

If private EMS or other Health Services are to be provided, please fill out the information below.

Description of Service: \_\_\_\_\_

Company: \_\_\_\_\_

Contact Information: \_\_\_\_\_

**PARKS & RECREATION**

**Is your event location at a City park or on a trail?**  Yes  No

*Reminder: If yes, contact Parks & Recreation Reservations (see Special Event Guidelines)*

If at a park or trail, which one(s)? \_\_\_\_\_

If using a trail, what section(s) do you plan to use? (Attach map if needed.)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**RESTROOMS & SITE CLEANUP**

**How do you plan to handle restroom services?**  Portable Toilets  Other

If portable toilets will be provided, please list the name/contact of the company:

\_\_\_\_\_

If no portable toilets will be provided, how will these requirements be handled?

\_\_\_\_\_

**How do you plan to remove garbage and/or recycling?**

*Reminder: If requesting City receptacles, contact Solid Waste Management (see Special Event Guidelines)*

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**What is your plan for site cleanup?** \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**PARKING**

**What is your plan to provide parking for event attendees?** (list locations) \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

**What is your plan to provide parking for volunteers, staff, and VIP's during the event? (list locations)**

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**What is your plan to provide handicap-accessible parking?** \_\_\_\_\_

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If you are requesting that parking spaces be reserved or closed to accommodate the event, please identify the street location(s) below. (Example: 200 block of W. Main Street – all spaces)

\_\_\_\_ block of \_\_\_\_\_

\_\_\_\_ block of \_\_\_\_\_

\_\_\_\_ block of \_\_\_\_\_

\_\_\_\_ block of \_\_\_\_\_

## UTILITIES

If you plan to use City water for your event, you must tap into it through a fire hydrant onsite. A temporary water meter must be installed for this usage.

**Will you need a temporary water meter installed?**  Yes  No

*Reminder: If yes, contact Water Management (see Special Event Guidelines)*

The City of Durham does not provide electricity for events. Please do a site assessment and make plans for these needs.

## FINANCIAL TRANSACTIONS

**Will an admission, registration, or membership fee be charged?**  Yes  No

**Will tickets, admission, donations, and/or contributions be accepted onsite?**  Yes  No

List all parties who will receive the proceeds from the donations or contributions:

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## FOOD AND DRINK SALES

**Do you plan to sell, distribute or give away food or refreshments?**

Yes (Sell)  Yes (Distribute/Giveaway)  No

If yes, please describe: \_\_\_\_\_

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**Will gas grills, propane stoves, or similar devices be used?**  Yes  No

**Do you plan to serve or sell alcohol?**  Yes  No

*Reminder: If yes, must contact Alcoholic Beverage Commission and provide appropriate insurance coverage.*

Type of alcohol (check all that apply):

Beer  Unfortified Wine  Fortified Wine/Liquor

Who is serving/selling alcohol (check all that apply):

Host  Caterer  Other: \_\_\_\_\_

**ADVERTISING**

What media will you use to advertise your event (please list)? \_\_\_\_\_  
\_\_\_\_\_

If using the Internet, please provide a website and/or page where up-to-date information can be viewed by the public: \_\_\_\_\_

**CONDITIONS OF YOUR APPLICATION**

Submitting this Special Event Permit Application does not provide permission to conduct your planned event. **Please do not send out publicity, flyers, or other media prior to receiving confirmation of approval.** Your confirmation will be in the form of a PERMIT, issued to the organization and/or person responsible for conducting the event.

Applicants agree to remove all props and items brought into the public areas and clean up all litter and debris that result from the event the same day as the event (unless explicit arrangements are made otherwise). Issuance of a permit does NOT grant applicants permission to tow vehicles from reserved or closed areas.

**Return this application and all supporting documentation (including the Street Closure Notification Form) to:**

**By Email:** [SpecialEvents@durhamnc.gov](mailto:SpecialEvents@durhamnc.gov)

**By Mail:**

Police Department  
Attn: Rosemary Kearney  
505 W. Chapel Hill Street  
Durham, NC 27701

**In Person:**

Police Department  
Attn: Rosemary Kearney  
3022B Fayetteville St.  
Durham, NC 27707

**Final approval of the permit will be authorized by the City Manager’s designee, the Lieutenant of the Police Department’s Central District.**

CANCELLATION POLICY: Written notification of intent to cancel your event must be received in writing a minimum of 21 days prior to the scheduled event date. It should be received by the Special Event Coordinator at the address above or emailed to [SpecialEvents@durhamnc.gov](mailto:SpecialEvents@durhamnc.gov).

**PLEASE SIGN AND DATE**

1. I certify that all the information included in this application and in all supporting documentation is true and accurate to the best of my knowledge.
2. I have read, understood, and agree to the City of Durham Special Event Guidelines and any rules, regulations, and fees outlined in it.
3. By signing and submitting this application, I and/or the sponsoring organization(s) agree to abide by the laws, rules, regulations, and deadlines of the City of Durham.

\_\_\_\_\_  
*Applicant's Signature*

\_\_\_\_\_  
*Date*

## (OPTIONAL) ADDITIONAL PERMITS/ARRANGEMENTS CHECKLIST

This checklist is designed to help the Event Coordinator check that he or she has obtained all needed City services and required permits. **Acquisition of these and any other permits and services is the Event Coordinator's responsibility.** Please consult the City of Durham Special Event Guidelines for more detailed information about each of these items.

### CITY SERVICES

1. If you will be using a City park or trail, have you reserved the space with Parks & Recreation?  
 Yes     No     N/A
2. If you will require City receptacles for trash collection, have you requested carts through the Solid Waste Department?  
 Yes     No     N/A
3. If you will need to use City water for your event, have you arranged with the Water Management Department to have a temporary water meter installed?  
 Yes     No     N/A
4. If you will need to use City EMT services, plan to have fireworks, or plan to use a tent 400 sq. ft. or larger, have you made arrangements with the Fire Marshal?  
 Yes     No     N/A
5. If you will sell or serve alcohol of any type, have you made arrangements for security services with the Police Department or another law enforcement agency?  
 Yes     No     N/A
6. If you will need to reserve on-street parking spaces, have you requested a special event parking permit through PARKDURHAM?  
 Yes     No     N/A

### OTHER PERMITS

7. If you will sell alcohol or serve fortified wine or liquor, have you obtained a permit from the NC Alcoholic Beverage Control Commission?  
 Yes     No     N/A
8. If you will be cooking food under a tent or selling food, have you made arrangements for inspections with the Durham County Health Department?  
 Yes     No     N/A

### INSURANCE

9. If your event meets the criteria for liability insurance requirements, have you secured the insurance and listed the City under Additional Insured?  
 Yes     No     N/A