



Event: _____

Date of
Event: _____

City of Grove City

Special Event Permit Application

Complete and return to:
City of Grove City
Executive Assistant
4035 Broadway
Grove City, OH 43123
614-277-3000 Fax 614-277-3011
juhrin@grovecityohio.gov
www.GroveCityOhio.gov

This completed application must be received by the City of Grove City 90 days prior to the proposed event. If permit packet is not received by that time, City staff has the right to refuse to review the event permit.

Name of Event: _____

Day & Date of Event: _____

Location of Event: _____

Responsible Organization: _____

Website: _____

Contact Name: _____

Please note whether the following mailing address is for the organization or the contact's residence.

Address _____

City State _____ Zip _____

Telephone (H) _____ (B) _____

Cell Phone _____ Fax _____

Email _____

Type of Event Run/Walk Bike/Race Parade Street Fair Other

If other, please describe _____

Brief Description, including purpose, target audience and description:

Day/Dates/Times of Event Set Up _____

Day/Dates/Times of Tear Down _____

Day/Dates/Times of Rain Event _____

Will you charge admission or participation fee? If so, what? _____

If parade, race, run or walk, please indicate route and attach a proposed route map:

Attendance: Anticipated Spectators: _____ Anticipated Participants: _____

Will the normal operation of residents or businesses be affected by your event? Yes No

If yes, Please attach a copy of the notification letter to be approved by the Executive Assistant or City Administrator before being sent to the affected residents/businesses.

Security and First Aid

Describe your internal security procedures (e.g. are you hiring a private security firm?):

Will you request Grove City Police for your event security? Yes No

Will there be a command post at your event? Yes No

Will you have an on-site provider of primary first aid? Yes No

If yes, will you request on-site Jackson Township Fire Dept. or other provider? JTFD Other

Please list the provider aid if other than Jackson Township:

Contact: _____ Phone: _____

Traffic Control & Parking Resources

Please describe your traffic, parking and overflow plan (also indicate on attached map): _____

Will you request the services of Grove City Police for traffic control? Yes No

List specific lot locations and number of parking spaces available: _____

Will you charge a fee for parking? If so, what? _____

Will you request on-street parking removal? Yes No Will you request any street be closed? Yes No

If yes, please list street(s), date(s) & time(s): _____

Will you require barricades? Yes No Quantity: _____ Traffic Cones? Yes No Quantity: _____

Signage

Will this event require temporary No Parking signs? Yes No Quantity: _____

Handicapped Parking Signs? Yes No Quantity: _____

Directional Signage? Yes No Quantity: _____

Sandwich Boards? Yes No Quantity: _____

Sanitation

Will streets need to be cleaned before/after event? Yes No

Describe your clean-up plans both during and after the event: _____

Event _____

Company delivering trash and/or recycling dumpster: _____

Contact: _____ Phone: _____ After hours phone: _____

Dumpsters and trash clean-up are responsibility of the event organizer. Charges may be incurred for any clean-up performed by City staff.

Portable toilets rental company: _____

Contact: _____ Phone: _____ After hours phone: _____

Proposed locations (also indicate on attached map): _____

Drop off date/time: _____ Pick-up date/time: _____

Electric

Will you use electricity? Yes No Generators? Yes No

Outdoor extension cords must be 3-prong UL listed extension cords. Proper grounding required.

Describe electrical usage: _____

All electrical and temporary structure permits must be obtained from the Grove City Building Division

Equipment

Will you use tents or inflatables? Yes No Rental company/Phone Number _____

List tent or inflatable size(s)& location(s) and attach map: _____

A permit from Jackson Township Fire Department 614-875-5588 is required for any inflatable or any tent 400 square feet or larger.

Will other temporary structures be used (e.g., bleachers, stages, etc.)? Yes No

If so, please list specifics and locations and attach map: _____

Entertainment Activities

Will you have music? Yes No If yes, what type of music/amplification (e.g., D.J. live band, portable system) _____

Time(s) of music: _____ **(Please Note: Amplified music requires City Council approval)**

Food and Beverage

Will food be sold at your event? Yes No If yes, describe: _____

If yes, each vendor must obtain a food vendor license. If they do not have a license, please contact the appropriate County Board of Health office to secure one.

Will food be served at your event? Yes No If yes, describe: _____

Event _____

Will alcohol be sold or served at your event? Yes No

If yes, attach a complete list of who will be serving alcohol and a completed F-2 Permit Application

What is your training for alcohol servers? _____

Will you request alcohol training from the Grove City Police? Yes No

Facility/ Park Rental and Reservation

Will you rent a City facility/park for your event? Yes No

If yes, please list which one? _____

Have you reserved the facility/park through the Department of Parks and Recreation? Yes No

Please list date/time of facility/park reservation: _____

City of Grove City Hold Harmless/Indemnity Agreement

To the fullest extent by law, the undersigned organization agrees to indemnify and hold the City of Grove City, its respective officers, agents and employees and volunteers harmless from and against all loss, costs, expense, damage, liability, or claims, whether groundless or not, arising out of bodily injury, sickness, or disease (including death result at any time there from) which may be sustained or claimed by any persons, or damage or destruction of any property, including the loss of use thereof, based on any act or omission, negligent or otherwise, of the Organization, or anyone acting on its behalf in connection with or incident or the event scheduled for, except that the Organization shall not be responsible to the City on indemnity for damages caused by or resulting from the City's sole negligence; and the Organization shall, at its own cost and expense, defend any such claim and any suit, action or proceeding which may be commenced there under. And the Organization shall pay any and all judgments that may be recovered in any suit, action or proceeding, and all expense, including but not limited to, costs, attorney's fees and settlement expenses that may be incurred therein.

Organization Name	Date	Authorized Signature	Date
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Distribution:

Public Service Director _____ Approved _____ Not Approved _____

Jackson Township Fire Chief _____ Approved _____ Not Approved _____

Event _____

Chief Building and Zoning Official _____

Approved ____ Not Approved ____

Parks and Recreation Director _____

Approved ____ Not Approved ____

Chief of Police _____

Approved ____ Not Approved ____

Special Event Provisions _____

Approved:

Date

Deputy City Administrator

Approved as to Form

Date

Law Director

Event Organizer

By signing below, I certify that I have read, understand and agree to abide by the policies and procedures of the City of Grove City as they pertain to the event I am organizing.

Event Organizer: _____ *Date:* _____

Event Organizer: _____ *Date:* _____

Attachments Check List

- Detailed layout map, with tent locations, vendor sites, etc. Resident/business notification letter
- Tent Permit Electrical Permit Sign Permit Fireworks Permit Outdoor Concert Permit
- Route map Insurance Requirement Alcohol Permit (F-2) Temporary Structure Permit
- Property Owner Approval Letter Food Vendor License