APPLICATION FOR SPECIAL EVENTS - ORDINANCE # 2015-06

Maxatawny Township

Applicant for Permit:		
Address:		
Telephone: Home:		
Email:		
Date of Event:		
Time of Event Starting:	Time of Event End	ding:
Reason for Event:		
Portions of the streets to be traversed or b	locked that may be occupied by	y the Event:
ATTACH TO THIS FORM ANY/ALL ADDITION	IAL PERTINENT INFORMATION,	
		wnship at least thirty (30) days prior to than one hundred eighty days (180) days prior
		ts; or if no moving, the location of the event. will constitute such event; the type of animals
Maps detailing the proposed site to	-	•
agents as an additional insured.	bility insurance, naming the To	wnship of Maxatawny and their officers and
amended from time to time. The for	ees shall accompany the applications. Township, the fee, minus and a	lution of the Board of Supervisors and as ation. If event is cancelled or not held after dministrative fee established by Resolution of
Signature of Event organizer and applicant:	;	Date
Approval	1	FOR OFFICE USE ONLY
Granted	/	
Signed		
Approved		