

Fairfield Town

Utah County, Utah

Special Event Application

Name of Event: _____ **Dates of Event:** _____

Responsible Party(s): _____

Address: _____

City, State, Zip: _____

Contact Name: _____

Phone: _____

Contact Email Address: _____

Type of Event: ___ Public Gathering ___ Private Gathering ___ Parade ___ Walk/Run ___
Fair/Festival ___ Other _____

Location of Event: _____

Use of any Town Property: _____

Private Property: _____

Utah State Commission Sales Tax #: _____

Details of the Event:

- **Will food be served?** ☐ Yes ☐ No (If yes, attach Health Department approval)
- **Will alcohol be served?** ☐ Yes ☐ No (If yes, attach state liquor permit)
- **Will amplified sound be used?** ☐ Yes ☐ No
- **Will street closures be required?** ☐ Yes ☐ No (If yes, attach traffic control plan)
- **Will tents or structures be used?** ☐ Yes ☐ No (If yes, attach site plan and Fire Department approval)
- **Will security be provided?** ☐ Yes ☐ No (If yes, list security company):

- **Will restrooms be provided?** ☐ Yes ☐ No (If yes, provide details):

- **Will vendors be present?** ☐ Yes ☐ No (If yes, attach vendor list and business licenses)
- **Emergency Plan Attached?** ☐ Yes ☐ No

Onsite Contact(s):

They must carry all permits and tax information on them at all times during the event.

Contact 1 Name: _____

Address: _____

Phone: _____ Email: _____

Contact 2 Name: _____

Address: _____

Phone: _____ Email: _____

Number of employees: _____

Estimated Number of Participants: _____ Estimated Number of Spectators: _____

Proof of Liability Insurance:

Company: _____

Address: _____

Email Address: _____

Phone: _____

Policy Number: _____ (attach a copy of insurance)

Other Permits: You are responsible for obtaining all permits to hold your event.

Health Department (<https://health.utahcounty.gov/environmental-health/annual-permits-and-certifications/>)

Temporary Mass Gathering Permit number: _____

Other Health Department Permit Number: _____

Fire Department Permit number: _____

Sheriff's Department Permit number: _____

Attach all copies of permits to the application.

The undersigned acknowledges that the information in this application is true and correct and agrees to adhere to all rules, regulations, and policies established by Fairfield Town. The applicant also understands that an Event Permit does not authorize any violation of the

provisions of the Fairfield Town Code or any other code of law, rules, regulations, or ordinances. The undersigned agrees to waive and release all rights and claims that might be had against Fairfield Town facilities or services.

Signature of Applicant: _____ Date: _____

Signature of Property Owner: _____ Date: _____

Advertising and/or ticket sales should not begin until the application is approved.

Allow 30 days for the application and approval process.

Payment must be received before the application will be processed. Include a check payable to Fairfield Town with your application.

For Office Use Only

Date: ____/____/____

- ☐ Application fees paid
- ☐ Fire Marshal Approval: Date _____ By: _____
- ☐ Fire Marshal fees
- ☐ Sheriffs Office permit: _____
- ☐ Sheriffs Office Fees
- ☐ Utah County Health Department Approval Number _____
- ☐ State liquor permit: _____
- ☐ Traffic control Plan
- ☐ Emergency Plan
- ☐ Insurance Permit
- ☐ Planning Commission: Approved: _____ Denied: _____ Date: _____

Comments: _____

☐ Total Fees: _____ Paid: _____

☐ Check #: _____

☐ Permit #: _____

Title

Signature

Date