



# City of Corning

SPECIAL EVENT PERMIT APPLICATION  
FOR PARKS OR CITY STREET USE  
THIS RESERVATION IS NOT VALID UNTIL APPROVED

TYPE OF EVENT	
PUBLIC [ ]	PRIVATE [ ]

**APPLICANT INFORMATION**

Must be 18 or older to submit an application \* No glass containers \* Application fee due upon submittal  
\*Application must be submitted a minimum of three weeks prior to the event\*

\_\_\_\_\_  
Name of Applicant / Contact Person

\_\_\_\_\_  
Name of Event

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

\_\_\_\_\_  
Description of Event (Parade, walk/run, etc.)

\_\_\_\_\_  
Home, Organization or Company Address

\_\_\_\_\_  
Date of Event

\_\_\_\_\_  
City, State and Zip

\_\_\_\_\_  
Location of Event

(    )  
\_\_\_\_\_  
Contact Phone #

From: \_\_\_\_\_ am/pm To: \_\_\_\_\_ am/pm  
\_\_\_\_\_  
Total Time for Set-up, Event & Clean-up

\_\_\_\_\_  
E-mail Address

From: \_\_\_\_\_ am/pm To: \_\_\_\_\_ am/pm  
\_\_\_\_\_  
Time of Event

\_\_\_\_\_  
Estimated Number of Participants

Please answer the following questions:	YES	NO
Is this an annual event? How many years have you been holding this event? _____		
Will there be admission, entry fee(s) or participant fee(s) required for your event? If "yes" what is the fee? _____		
Will there be amplified sound/music at the event? Specify Type: (microphone, band, radio, PA system, etc.) _____		
Will there be any entertainment apparatus? Specify Type: (stage, etc.) _____		
Will there be any vendors at this event? If "yes" please provide a separate list.		
Will there be any alcohol served at this event? If "yes" by who? _____		
Will any part of the event take place in the public right of way? (sidewalk, street, etc.) If "yes" please attach a completed Encroachment Permit application.		

**\*Attach a map showing the proposed event location and any portion of the streets and alleys to be closed. Indicate where barricades, cones or other devices would be installed to close streets and/or alleys.**



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Please include any other information regarding the event that the City of Corning may need to know about.

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### Insurance

Do you have insurance coverage for this event? Yes / No

Insurance Company / Policy Number: \_\_\_\_\_

Note: Applicant is required to provide liability insurance in the minimum amount of \$2,000,000 per occurrence and \$4,000,000 aggregate and name "The City of Corning, its elected officials, officers and employees" as additional insureds.

*(Attach copy of Certificate of Insurance)*

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Signature of Applicant

Print/Type Name

Date



# City of Corning

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## For Department Use Only Requirements & Remarks

### Police Department

**NO ONE UNDER 21 IS ALLOWED TO CONSUME ALCOHOL**

Security Officers Needed \_\_\_\_\_

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### Public Works Department

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### Fire Department

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### Recreation Department

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_____ Authorizing Signature – Police Department	_____ Date
_____ Authorizing Signature – Public Works Department	_____ Date
_____ Authorizing Signature – Fire Department	_____ Date
_____ Authorizing Signature – Recreation Department	_____ Date
_____ Authorizing Signature – City Manager	_____ Date