



## APPLICATION FOR SPECIAL EVENT(S)

**PLEASE PRINT**

1. **NAME OF EVENT:** \_\_\_\_\_
2. **DATE OF EVENT:** \_\_\_\_\_
3. **CIVIC ADDRESS of EVENT:** \_\_\_\_\_

**4. APPLICANT INFORMATION:**

- (a) Applicant(s) (promoter) Name: \_\_\_\_\_
- (b) Applicant's Driver's License No. and Birthdate \_\_\_\_\_
- (c) Mailing Address: \_\_\_\_\_

Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_

- (d) Telephone No. Business: \_\_\_\_\_ Residence or Cell: \_\_\_\_\_

(e) Email address: \_\_\_\_\_

(f) Applicant (promoter) Business License No. \_\_\_\_\_

(g) If incorporated: Date of Incorporation: \_\_\_\_\_

Incorporation No. \_\_\_\_\_

Directors Names: \_\_\_\_\_

- (h) Names & contact numbers (cellular, direct lines and/or pagers) of persons who will be on site at the event and who will have direct authority and responsibility: \_\_\_\_\_

- (i) Please list below the names and Business License Numbers of any companies or individuals that will be selling merchandise at the event (i.e. water, food, jewelry, etc). *Use additional paper if required.*

- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_

**5. EVENT INFORMATION**

All tents are required to be fire rated and must be inspected by the Municipal Fire Inspector.

(a) Will alcohol be served at the event? Yes  No

(b) Will minors be admitted (18 and under) Yes  No

(c) Age group of expected attendees \_\_\_\_\_

(d) Proposed hours of operation \_\_\_\_\_

(e) Proposed patron capacity: \_\_\_\_\_ Fire Capacity: \_\_\_\_\_

(f) Type of entertainment: \_\_\_\_\_

(g) Type of food and beverages available at event: \_\_\_\_\_

(h) Liquor License has been applied for: Yes \_\_\_\_\_ No \_\_\_\_\_

(i) Have you applied for a Food License: Yes \_\_\_\_\_ No \_\_\_\_\_

*Anyone in Nova Scotia who wants to operate a foodservice facility such as: restaurant, food take-out, mobile canteen, temporary food establishment, or a grocery store or push carts or any facility from which foods are sold, requires a permit: [www.novascotia.ca/nse/food-protection/](http://www.novascotia.ca/nse/food-protection/)*

6. OPERATIONAL Plan including Traffic and Security

(a) RCMP File #: \_\_\_\_\_

**An RCMP File Number will be generated after submission of the Special Event application.**

- (b) Have you created a Traffic Control Plan: Yes  No
- It is the responsibility of the event organizers to ensure event attendees use designated parking areas and to ensure the safety of vehicular and pedestrian traffic during the event.
  - The event will ensure access of emergency vehicles to the event site and parking areas.
  - All traffic control devices will be removed immediately following the event.
  - The event organizers are responsible to provide a sufficient number of traffic control personnel to ensure the safety of vehicles and pedestrians.

(c) Describe the transportation options to and from the event (i.e. public transit, taxi-cab, etc) \_\_\_\_\_

(d) Describe automobile parking arrangements for your event patrons (i.e. number & location) \_\_\_\_\_

(e) Is a road closure required? Yes  No

(f) Have you created a Security Plan for your event? Yes  No

(g) Security Company Name & Business License No: \_\_\_\_\_

(h) Is the Security Company insured for late night events? Yes  No

(i) Have you budgeted for the cost of the additional police presence during the event?  
Yes  No  If YES, how many officers have you budgeted for? \_\_\_\_\_

(j) How many volunteers are assisting with your event? \_\_\_\_\_

(k) Do you have sufficient safety vests for your volunteers or ways to identify your volunteers? \_\_\_\_\_

(l) Have you organized a Special Event before? Yes  No   
If YES, when & where? \_\_\_\_\_  
At these events, were there incidents that required police or emergency services to attend? \_\_\_\_\_

(6) REQUIRED ATTACHMENTS

- (a) Have you attached a copy of your OPERATIONS Plan? Yes  No   
Two copies of the completed Operations/Security/Traffic Controls plan that meets industry standards are attached to this application form which include: Provisions and details on first aid, security, entrance and line control and post neighbourhood clean-up measures, etc.
- (b) A non-refundable processing application fee of \$100.00 is attached to this application. *(This fee is waived for non-profit and charitable organizations)*
- (c) A letter from the facility owner indicating their approval of the event is attached to this application.

(7) PROMOTER COMMITMENT I / We agree to the following:

- **To follow any and all provincial or federal government orders.**
- Ensuring that potable water will be available to all participants.
- To cover the costs of additional policing, as proposed, presented and recommended by the RCMP. (Payment for additional police officers will NOT be accepted in-lieu of security personnel). Payment for the additional police officers is due prior to issuance of the Permit.
- To Provide space at the event for community-based drug and health awareness displays.
- To accept full responsibility for dealing with ticket holders in the event that a permit is not approved by the West Hants Regional Municipality.

**NOTE:** Applications will be received by the Manager, Community Economic Development, West Hants Regional Municipality, 76 Morison Drive, Windsor. The application will be relayed to all departments including Police, Fire, Planning, Traffic Authority, Public Works, EMO, and where applicable, the NS Dept of Transportation and Infrastructure Renewal, or any other government body depending on the event.

Applicant's Signature & Print \_\_\_\_\_

Date \_\_\_\_\_

## OFFICE USE ONLY

<p style="text-align: center;"><b>PLANNING DEPARTMENT</b></p> <p>Is the proposed location suitable?    Yes <input type="checkbox"/>    No <input type="checkbox"/></p> <p>Are residential uses in close proximity?    Yes <input type="checkbox"/>    No <input type="checkbox"/></p> <p>Do you approve of the event?    Yes <input type="checkbox"/>    No <input type="checkbox"/></p> <p>Comments/Conditions: _____          _____          _____</p> <p>Signature _____</p>	<p style="text-align: center;"><b>FIRE DEPARTMENT</b></p> <p>Maximum Fire Capacity: _____</p> <p>Plans Submitted/Approved?    Yes <input type="checkbox"/>    No <input type="checkbox"/></p> <p>Do you approve of the event?    Yes <input type="checkbox"/>    No <input type="checkbox"/></p> <p>Comments/Conditions: _____          _____          _____</p> <p>Signature _____</p>
<p style="text-align: center;"><b>REMO DEPARTMENT</b></p> <p>Operational Plan Submitted/Approved?    Yes    No</p> <p>Do you approve the event?    Yes    No</p> <p>Comments/Conditions: _____          _____          _____</p> <p>Signature _____</p>	<p style="text-align: center;"><b>POLICE DEPARTMENT</b></p> <p>Security Plan Submitted/Approved?    Yes    No</p> <p>Do you approve of the event?    Yes    No</p> <p>Comments/Conditions: _____          _____          _____</p> <p>FILE # _____</p> <p>Signature _____</p>
<p style="text-align: center;"><b>PUBLIC WORKS DEPARTMENT</b></p> <p>Operational Plan Submitted/Approved?    Yes    No</p> <p>Do you approve the event?    Yes    No</p> <p>Comments/Conditions: _____          _____          _____</p> <p>Signature _____</p>	<p style="text-align: center;"><b>TRAFFIC AUTHORITY</b></p> <p>Operational Plan Submitted/Approved?    Yes    No</p> <p>Do you approve the event?    Yes    No</p> <p>Comments/Conditions: _____          _____          _____</p> <p>Signature _____</p>

**PERMITS & LICENSES**

Fees Paid:    Yes     No     If no, reason: \_\_\_\_\_

Approved:    Yes     No     **(MUST also be approved & signed-off on by REMO prior to final approval)**

If YES, Permit/License No. \_\_\_\_\_

If NO, reason(s): \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

\_\_\_\_\_  
 Approving Authority Signature (Manager, Community Economic Development, West Hants Regional Municipality)