



**CITY OF VIENNA**

**APPLICATION FOR PERMIT TO HOLD A SPECIAL ACTIVITY**

**NOTE:** A \$50.00 non-refundable application fee must accompany each request for a permit to hold a special activity on city-owned or city-maintained property. This application should be submitted thirty (30) days prior to the date of the event so that City personnel will have adequate time to review the request.

**NO VEHICLE TO BE DRIVEN ONTO ANY CITY PARK**

Name of Person submitting application: \_\_\_\_\_

Name of Organization: \_\_\_\_\_

Is this organization a for-profit entity?  Yes  No

Mailing Address: \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Telephone Numbers: \_(\_\_\_\_\_) \_\_\_\_\_ (\_\_\_\_\_) \_\_\_\_\_

Exact Location of Event: \_\_\_\_\_

Event Route, if applicable (please attach map)

Type of Activity, Program or Event: (provide details) \_\_\_\_\_

Will a fee be charged or donations accepted at this event?  Yes  No

Date of Activity: \_\_\_\_\_ Time of Activity: \_\_\_\_\_

Number of People and Vehicles expected to attend: \_\_\_\_\_

Do you need a street closed?  Yes  No If so, give hours to be closed: \_\_\_\_\_

Give specific location on the street to be closed: \_\_\_\_\_

Will this event affect the neighbors at the location?  Yes  No

Have the plans for this event been discussed with the adjoining property owners?  Yes  No

Please check the following services you will need from the City of Vienna:

*(You may be billed for additional costs associated with providing these services.)*

<input type="checkbox"/> Traffic Control	\$_____.	<input type="checkbox"/> Water Service	\$_____.
<input type="checkbox"/> Security Patrol	\$_____.	<input type="checkbox"/> Use of Restroom	\$_____.
<input type="checkbox"/> Garbage/Trash Pickup	\$_____.	<input type="checkbox"/> Electricity	\$_____.
<input type="checkbox"/> Fire protection on the site	\$_____.		

Signature of Person Responsible: \_\_\_\_\_ Date: \_\_\_\_\_

If considered necessary, are you willing to provide liability insurance with the City of Vienna listed as a named insured?  Yes  No  
(The insurance will be in an amount to be determined by the Mayor and City Council, with the advice of the City Attorney and the City insurance carrier.) You may be asked to sign an Indemnification Agreement for the use of real property owned or maintained by the City. This agreement will hold the City harmless of any damages, loss or injury that occurs in relation to this event. If this is required, you will be notified.

**PLEASE RETURN APPLICATION TO: CITY OF VIENNA, P. O. Box 436, 203 W Cotton Street,, VIENNA, GA 31092 PHONE (229) 268-4744  
FAX (229) 268-6172**

**FOR CITY USE ONLY**

Date application received: \_\_\_\_\_ Name of person receiving application: \_\_\_\_\_

Application Fee needed:  YES  NO  N/A Received CK:  CS:  Liability Insurance required?  Yes  No

Date review initiated: \_\_\_\_\_ Date review completed: \_\_\_\_\_ Date notification sent / called: \_\_\_\_\_

NOTIFIED:  VPD  Public Works  VFD

APPROVED: \_\_\_\_\_ DENIED: \_\_\_\_\_

[www.cityofvienna.org](http://www.cityofvienna.org)

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