

**TOWN OF PHILIPSBURG, MONTANA
SPECIAL EVENT & STREET CLOSURE RESERVATION APPLICATION FOR
ENTITIES WITHIN THE PHILIPSBURG PUBLIC SCHOOL DISTRICT**

PLEASE ATTACH A LETTER OF COMMUNICATION ASKING THE MAYOR FOR PERMISSION AND DETAILING THE EVENT AND A MAP OF THE AREA YOU WISH TO USE. PLEASE NOTE TIMES OF CLOSURE AND OPENING, DATES, EMERGENCY EGRESS, PARKING (IF APPLICABLE), AND ANY OTHER PERTINENT DETAILS.

⇒ Please complete where indicated and in the lighter shade alternating boxes only.

NAME OF EVENT:			
DATE:	HOURS:		
SPONSOR(S):			
ADDRESS:			
	CITY:	STATE:	ZIP:
WEBSITE:			
PURPOSE OF EVENT:			
ATTENDANCE:			
ALCOHOL SERVED:	<input type="checkbox"/> YES <input type="checkbox"/> NO SERVER:		
INSURANCE CARRIER:			

CONTACTS (PRIMARY CONTACT FIRST)

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NAME	PHONE	EMAIL

IN THE EVENT THAT WEATHER OR OTHER EVENTS REQUIRE US TO MAKE CONTACT WITH SOMEONE INVOLVED WITH YOUR EVENT. PLEASE MAKE SURE THAT AT LEAST ONE OF THESE INDIVIDUALS CAN BE REACHED AT ALL TIMES PRIOR TO, DURING, AND FOLLOWING YOUR EVENT.

FEEES

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LOCATION:	FEE	DEPOSIT	(OFFICE USE ONLY)	DEPOSIT REFUNDED
WINNINGHOFF	\$100	\$200		
*HUT ONLY	\$50	\$50		
ALUM (BEAR)	\$25	\$25		
OLD FIRE HALL	\$50	\$50		
MURFITT PAVILION	\$50	\$50		
STREET BLOCKS	\$100	\$500	DEPOSIT REFUNDED AFTER STREET CLEANUP	
STREET NAME:				
SHERIFF FEE:	\$200			
TOTAL			SUBTOTAL	FINAL

DEPOSIT COVERS THE COST OF CLEANING AND/OR INCIDENTALS.

YOU WILL BE RESPONSIBLE FOR THE FOLLOWING UPON APPROVAL OF YOUR APPLICATION:

LIABILITY INSURANCE (OFFICE USE ONLY)

<input type="checkbox"/> The User will obtain the following Insurance policies:	
COMMERCIAL GENERAL LIABILITY INCLUDING AUTOMOBILE. A COMMERCIAL GENERAL LIABILITY INSURANCE POLICY WITH COMBINED LIMITS OF LIABILITY FOR BODILY INJURY OR PROPERTY DAMAGE AS FOLLOWS (REQUIREMENTS ARE SHOWN AS LISTED ON A STANDARD FORM CERTIFICATE OF INSURANCE):	
\$1,000,000 OR _____	PER OCCURRENCE
\$1,000,000 OR _____	POLICY AGGREGATE
\$1,000,000 OR _____	PRODUCTS LIABILITY/COMPLETED OPERATIONS
\$1,000,000 OR _____	PERSONAL AND ADVERTISING INJURY
\$50,000 OR _____	FIRE LEGAL
\$5,000 OR _____	MEDICAL PAYMENTS

GARBAGE REMOVAL, SANITARY DISPOSAL OF HUMAN WASTE, EMERGENCY SERVICES/FIRST AID ONSITE, HEALTH PERMITS FOR FOOD VENDORS, PRIVATE SECURITY (IF DEEMED NECESSARY), LAW ENFORCEMENT AS REQUIRED BY LAW ENFORCEMENT OFFICIAL, BASIC EMERGENCY DISASTER PLAN, PROOF OF RESPONSIBLE BEVERAGE SERVICE AND SALES TRAINING FOR INDIVIDUALS INVOLVED WITH THE SALE OF ALCOHOL, NOTIFICATION TO RESIDENTS, BUSINESS OWNERS, AND PROPERTY WITHIN THE SPECIAL EVENT AREA, AND ANY REASONABLE ACCOMMODATION AS REQUESTED, ADEQUATE LIGHTING FOR NIGHT EVENTS (WHEN APPLICABLE), POST ALL NON-PARKING AREAS AT A MINIMUM OF 24 HOURS IN ADVANCE. THE MAYOR MAY ADJUST THESE LIMITS OF LIABILITY OR IMPOSE OTHER REQUIREMENTS DEPENDING ON THE DETAILS OF THE EVENT. THE POLICY OF INSURANCE MUST INCLUDE COVERAGE FOR ALL OPERATIONS PERFORMED BY THE USER AND SUB USERS. THE TOWN MUST BE NAMED AS ADDITIONAL INSURED.

SPECIAL PROVISIONS (OFFICE USE ONLY)

REQUIRED SIGNATURES OF APPROVAL (OFFICE USE ONLY)

DEPARTMENT HEAD	or DESIGNEE	REQUIRED	DATE
SHERRIF		<input type="checkbox"/>	
FIRE SERVICES		<input type="checkbox"/>	
AMBULANCE SERVICE		<input type="checkbox"/>	
PUBLIC WORKS		<input type="checkbox"/>	
MAYOR		DENIED _____	

PRIMARY CONTACT SIGNATURE

_____	DATE