

Special Event Permit Application

Brookhaven is pleased to welcome a variety of special events, from community festivals to athletic competitions. Our goal is to work with event sponsors and producers to help ensure that events that take place in our city are safe and successful, while minimizing the impact on the surrounding community. We hope that you will find these instructions helpful in planning and preparing to execute your special event.

A special event is any organized for profit or nonprofit activity having as its purpose entertainment, recreation, and/or education which takes place on public property or takes place on private property but requires special public services such as the use of parks, public streets, rights-of-ways, or sidewalks. Special events may include, but are not limited to, activities such as run/walk events, cycling events, street festivals, parades, triathlon/biathlon, grand openings, concerts, assemblies, block parties, and certain outdoor promotional events.

Individuals, organizations, or groups wishing to hold events on public property, or on private property but with an impact on public property, such as roads and City parks, must obtain a Special Event Permit from the City of Brookhaven.

Although our Special Event Permit Application is used for a wide range of special events, the review process differs based on the type and details of the event. For example, if the event will include temporary structures such as tents or stationary vehicles, the Brookhaven Fire Marshal's office requires 5 business days to review site and temporary structure plans. (Furthermore, if alcohol is to be served or sold at the event, the event producer must also obtain a Temporary Alcohol Permit through the Finance Department and hire private security officers to prevent alcohol from being removed from the premises.)

As with the review process, the application fee for the special event permit varies depending on the length and type of the event. Permit application fees will be assessed based on the information provided in the application and must be paid at time of submittal of a complete application.

Special Event applications must be submitted at least 60 days prior to the planned special event. Public assemblages such as a procession, rally, or march must be filed at least 24 days prior to the planned event but no more than 60 days prior to the planned event.

All permits related to your special event should be posted at greeting areas or main entrances to the event. City staff may ask event producer to show proof of permit during the event.

Please submit the following Special Event Permit Application and required supplemental materials (detailed in the following checklist) to the Community Development Department located at 4362 Peachtree Rd NE, Brookhaven GA, 30319. If you have questions, please do not hesitate to contact the Community Development Department at (404) 637-0500.



Additional Information

The City of Brookhaven has an active special events schedule throughout the year. Special event permits may not be approved if conflicting with a City-sponsored or other event. For questions related to the Special Event Permit application, process, or scheduled events, please contact:

Whitni Patterson

whitni.patterson@brookhavenga.gov 404-637-0534

SUBMIT TO PARKS & RECREATION IF THIS IS A PARK RENTAL

Step 1

•Submit <u>completed</u> application in person or by mail to the Community Development Department at 4362 Peachtree Road, Brookhaven, GA 30319 between 8:30am — 4:30pm, Monday through Friday <u>60</u> <u>days prior to the planned event</u>. Applications submitted electronically without original signatures will not be accepted. No appointment is necessary. Applications that do not include all checklist items including applicable fees will be returned to the applicant.

Step 2

Acceptance of an application is not a guarantee of permit issuance, nor is it a guarantee of your
desired date and/or location. It is simply a confirmation that we have your materials on file and are
actively working towards getting you your permit. You will also hear whether or not there are any
conflicts with your desired date and/or location.

Step 3

•The Department will be in touch with any outstanding application needs until all requirements are satisfied. If you need additional sub-permits or supporting documents, it is your responsibility to reach out directly to the applicable departments. Please review the application checklist for information on sub-permits and supporting documents.

Step 4

•The Department will only issue an event permit when the application file is complete. A complete application file contains all necessary sub-permit applications, supporting documents, and fees paid in full, all within the application deadline. Once all the requirements are met, the application will be routed to Public Works, Police, Fire Marshal, and any other necessary departments for review.

Step 5

Once all departments have reviewed and approved the application, the Department will issue you your
permit. Permits for complete, approved applications will be <u>processed within 7 to 10 business days</u>.
The permit will be available for pick-up at the Department location and during the times listed under
step one above.

Helpful Numbers

DeKalb County Health Department 404-294-3700

City of Brookhaven (All Departments) 404-637-0500

Georgia Department of Revenue (Alcohol Permits) 404-417-4900

DeKalb County Fire Marshal (Fireworks) 678-406-7750

4362 Peachtree Road, Brookhaven, GA 30319 Phone: 404-637-0500 • Fax: 404-637-0501

www.BrookhavenGA.gov



Checklist

Applica	ation Requirements:			
	Event Details and Description			
	Contact Information for Producer, Event Sponsor, and Property Owner (including 24-hour contact)			
	Signed & Notarized Affidavit from Producer of the Event			
	ation Required Attachments:			
ш	Overall Site Plan of the event location. Plan must be drawn to scale and must include:			
	 all property boundaries and setbacks for proposed location of the special event 			
	 all existing buildings, structures, parking, and curb cuts permanently located on site 			
_	 any proposed temporary structures including buildings, structures, and parking 			
닏	Schedule of Proposed Activities			
	First Aid/Medical Support Plan			
	0 - 1999 attendees – First Aid Kit and a 911 call plan			
	2,000 – 5,000 attendees – First Aid Station (2 EMTs)			
	 5,000 – 10,000 attendees – First Aid Station (2 EMTs) and Foot EMTs 			
	 10,000 – 20,000 attendees – First Aid Station (2 EMTs), Foot EMTs, and Ambulance (ALS Unit) 			
	 20,000 + attendees – contact me directly to discuss coverage requirements 			
	Waste Disposal Facilities and Control Plan			
	Daily trash cleanup is required. The producer of the event must clean property of all rubbish and debris,			
	returning site to its pre-event condition within 24 hours of the event.			
	Restroom Facilities Plan			
	Crowd and Traffic Control Plan			
_	Parking Plan			
	Recycling Plan			
	Staging Area Plan (for Film Permits)			
	Proof of Notification of Neighboring Residences and Businesses			
	Please provide proof of notification, in a written form, of neighboring residences and businesses surrounding			
	the hub of the event of your intent to host a special event (including any proposed road closures). [See			
	attached form] Decumentation of 501e3 status. If receiving 50% fee reduction			
ш	Documentation of 501c3 status. If receiving 50% fee reduction			
The fol	lowing items may be required, if applicable:			
	Scale Drawings of all Temporary Structures, including:			
	 sizes and types of temporary structures 			
	 vehicle and trailer storage locations 			
	 exits and entrances in temporary structures 			
_	relation to existing buildings and structures			
╚	Banner Sign Permit Application or Special Event Sign Permit Application			
브	Permission from Property Owner(s)			
片	 □ Proposed Street / Parking Lot Closure and Traffic Plan □ Recording Equipment and Sound Amplification Plan 			
	Fireworks Permit			
☐ Temporary Alcohol Permit				
_	Business License			
님	Proof of Comprehensive Liability Insurance			
Ц	Food Vendor Permit from Health Department (if applicable)			



Event Description

	Name of Event:					
Type	Type of Even	☐ Run / Walk ☐ Triathlon / Biathlon	☐ Cycling Event☐ Grand Opening	☐ Street Festival ☐ Other -	☐ Parade	
Event Details	Purpose of Eve	ent:				
	Location of the	Event (street address):				
	Date/Duration	of Event, From:		To:		
	Actual Event H	lours:	a.m. / p.m.	Until:		a.m. / p.m.
	Setup / Assem	bly Date:		Start Time:		a.m. / p.m.
	Dismantle Date	e:		Completion	Time:	a.m. / p.m.
	Projected Event Attendance:					
	Required Over	all Site Plan – attached?				☐ Yes
ıts	Required Sche	edule of Proposed Activitie	es – attached?			☐ Yes
Required Attachments	Required First Aid / Medical Support Plan – attached?				☐ Yes	
tach	Required Wast	te Disposal Facilities and	Control Plan – attache	d?		☐ Yes
J Ati	Required Restroom Facilities Plan – attached?			☐ Yes		
uirec	Required Traffi	ic and Crowd Control Pla	n – attached?			☐ Yes
hbə	Required Recv	cling Plan – attached?				☐ Yes
œ	Required Parking Plan – attached?			☐ Yes		
	Required Proof of Notification of Neighboring Residences and Businesses – attached?				☐ Yes	
ents	Will temporary structures, such as tents, a stage, or stationary vehicles, be part of the event? If yes, please attach a scaled Site Plan showing all permanent and proposed temporary structures on the property at which the event is proposed to be held. The Site Plan should include property boundary lines, setbacks, and buffers. For any temporary structures please attach scale drawings showing size and exits.				□ Yes □ No	
equirements	If yes, event sp	applied for a special even consors must be in compl	iance with Chapter 21-			☐ Yes ☐ No
\If Applicable, Additional Req	Will the event occur on private property? If yes, please attach a list any street(s) and parking lot(s) to be closed as a result of the event. Include the street name(s), date, and proposed time of closing and time of reopening as well as traffic and parking plans				☐ Yes ☐ No	
	Will the event require closing of any City streets or parking lots? If yes, please attach a list any street(s) and parking lot(s) to be closed as a result of the event. Include the street name(s), date, and proposed time of closing and time of reopening as well as traffic and parking plans.				☐ Yes ☐ No	
		nclude recording equipmontatach description of any e		n, or other attention get	ing devices?	☐ Yes ☐ No
	Will the event include the use or sale of fireworks? If yes, fireworks are not permitted without approval from the DeKalb County Fire Department.				☐ Yes ☐ No	
	Will the event include the consumption or sale of alcohol? If yes, event sponsors must be in compliance with Chapter 4, Alcoholic Beverage Ordinance.				☐ Yes ☐ No	



Contact Information

Producer	Name:
	Company:
	Address:
	Phone:
	Email:
	Company:
or	Contact:
Event Sponsor	Address:
ent (Phone:
Eve	Email:
	Does Event Sponsor have a business license? (yes / no)
	If yes, please attach a copy of business license.
er	Owner's Name:
Property Owner	Owner's Address:
operty	Phone:
Pro	Email:
our	Contact Name:
24-Hour Contact	Contact Phone:

Note: The Special Event Permit shall be issued only to an individual person, the producer of the event. In this case, producer means the person responsible for planning, producing, and conducting the special event. If a group, organization, association, or other entity is producing the special event, a designated agent of the producer shall be named for purposes of the permit, and that individual shall be solely and fully responsible for compliance with all provisions of the Special Events Permit.

Optional – Interest in City Involvement:

If appropriate and desired by the event, the City may be interested in participating in the event or utilizing space for public education or public relations. Answering this question is optional and is not required of any event nor could it be construed as grounds for denial of an application.

Would your event be interested in donating space for the City participation at your event? (yes / no)



Producer's Certification, Affidavit and Signature

Name of Event:			
Brief Description of Event:			
I hereby agree that as a condition to the issuance of a Special Event Permit, the Producer of the Event shall indemnify and hold the City harmless from claims, demand or cause of action which may arise from activities associated with the event.			
I hereby solemnly swear, subject to criminal penalties for false swearing, that the statements and answers made by me to the foregoing questions in this application for a Special Event Permit, are true, and no false or fraudulent statement or answer is made herein to procure the granting of such permit.			
I hereby certify that the site plan and description prov with all applicable zoning ordinances and laws govern		dance	
I hereby state and understand that should a complaint be filed against the Producer of the Event for violation of any regulation associated with the application for the City of Brookhaven Special Event Permit, the permit issued for the event will immediately become void and will not reissue for the same location.			
Producer's Signature:	Date:		
	, State: Zip:		
Phone:			
Sworn and Attested before me on this day of	, 20		
Notary Public:			
perty Owner's Certification, idavit and Signature			

Pro Affi

	Signature:	Date:		
Property Owner	Address:	City, State:	Zip:	
	Phone:			
	Sworn and Attested before me this da	ay of, 20		
Pro	Notary Public:			

The property owner acknowledges that this application form is correct and complete. If additional materials are determined to be necessary, they understand that they are responsible for filing additional materials as specified by the City of Brookhaven Code of Ordinances.



Notification of Temporary Street Closure

Neighborhood and community outreach is required for all Special Events. At minimum, the City of Brookhaven requires that all affected residents/businesses both on and adjacent to a proposed street closure be notified of such 30 days prior to the proposed event. The City will provide the list of affected property owners to the event producer and the event producer will be required to send a notification letter and obtain signatures from each owner on the form below. When sending the notification letter and obtaining signatures, the event producer must provide the property owners a copy of the proposed street closure map. Additionally, notification signs may be required at the event producers' in the neighborhood during the street closure for traffic routing purposes.

SAMPLE NOTIFICATION LETTER

NOTIFICATION OF TEMPORARY STREET CLOSURE

EVENT NAME: [Name of Special Event]

LOCATION: [Location of Special Event] See attached Street Closure map.

DATE(s): [Date(s) of Special Event Impact]
TIME(s): [Time(s) of Special Event Impact]

EVENT PRODUCER: [Producer Name]

24-HOUR CONTACT: [Name], [cellular number]

On [Date], our organization [Name] will be producing a special event in your neighborhood called [Event Name]. [Event Name] will include a temporary street closure and the City of Brookhaven requires early notification to affected property owners. We are thrilled to be guests in your neighborhood and it's important to us that we are communicating clearly with you, the neighbors.

EVENT DESCRIPTION (include applicable items):

- We will be loading in beginning at [hour] on [date], and will load out until [hour] on [date].
- We will leave your neighborhood as we found it: litter and recycling will be handled by [name of contractor]
- During the event hours, we expect between [Low # and High #] attendees per day.
- Streets will be closed or have limited vehicle and/or pedestrian access between the hours of [Time] on [Date] through [Time] on [date.] See the attached map for specifics.
- We will have amplified sound during the hours of [Time start/finish] on [Date].
 - [Describe amplified music, public address, pre-recorded or live music. Outdoors or indoors?]
 - [Include location of amplified music on the map you attach]

We are working closely with the City of Brookhaven to minimize the impacts of the event. Our goal is to create an enjoyable and positive experience in your neighborhood.

If you or any of the surrounding residents and businesses have questions or comments about impacts of this event, please email us at:

[Contact Name, Title] [Organization] [Address] [Address] [Email]

A temporary street closure has been requested for the following date(s)/time(s) for the streets listed.

	Brookhave
CITY OF BROOKHAVEN SPECIAL EVENT	GEORGIA
ACKNOWLEDGEMENT OF TEMPORARY STREET CLOSURE NOTIF	ICATION

Name of	Event:	Event Type:			
Event Pro	oducer:	Phone Num			
Closure S	tart Date/Time:				
Closure E	nd Date/Time:				
Street Na	me(s):				
	g below, the undersigned acknowleddictions in the undersigned acknowleddictions in the contract of the contrac		of Temporary Street Closure and		
Date	Name	Address	Signature		



Indemnification & Hold Harmless

Subject to the granting of all permits required by the City of Brookhaven, the City of Brookhaven authorizes			
	to utilize		
(Special Events Appl			
(Site/A	ddress)		
for the purposes of conducting activities described in this spe	ecial event permit application.		
The Special Events Applicant agrees that the City of Brookhaven assumes no responsibility or liability for any defects or other conditions of the site(s), whether the conditions are known or unknown to either party, and/or discoverable by either party. The Special Events Applicant agrees to assume the risk for any and all defects and/or other conditions, whether these defects or other conditions are dangerous and/or whether these defects or other conditions are discoverable by either party, and/or know or unknown to either party.			
The Special Events Applicant shall indemnify and hold the City of Brookhaven and its officers, agents, and employees harmless and free from any and all claims, including but not limited to personal injury, property damage, alleged to have arisen or resulted wholly or partially from the exercise of any of the rights granted herein to the Special Events Applicant. This indemnification and hold harmless agreement includes, but is not limited to, the payment of all attorney fees, expenses, costs, judgment, and other expenses which may be incurred by the City of Brookhaven, its officers, agents, or employees as a result of any and all such claims.			
Producer's Name:			
Producer's Signature:			
Sworn and Attested before me on this day of _	, 20		
Notary Signature:			
Staff Use Only			
Application Received:	Event Date:		
Permit #:	CD Processed By:		
FA Processed By:	PW Processed By:		
PD Processed By:	FD Approved Date:		
Approved/Denied By:	Approved/Denied Date:		
Application Fee:	Fees Paid Date:		
Process Completed:	Permit Expiration Date:		