Town of Newport
APPLICATION FOR SPECIAL EVENT PERMIT

Complete the following application, provide event layout and return to the Customer Service Coordinator for the Town of Newport, 200 Howard Blvd, Newport, NC, 28570. See section III of the Special Events Support Policy for application deadline dates. Please, submit a processing fee of $25.00 (with exception of Class D events) with this application. All events require proof of insurance. For more information call (252) 223-3733. Additional requirements will be distributed prior to event approval.

Name of Proposed Event: ____________________________________________

Location of Proposed Event: ________________________________________

(Check all that Apply) Road Race: [     ] Walk: [     ] Festival: [     ] Performance: [     ]
Parade: [     ] Concert: [     ] Neighborhood: [     ] Sporting: [     ] Other: (Specify) [     ]

Beginning Date of Proposed Event: __________________ Time: ______ AM PM
Ending Date of Proposed Event: __________________ Time: ______ AM PM

Set-up Time: ______ AM PM Date: _______________ Tear—Down Time: ______ AM PM Date: ____________

The above times are used to estimate Town services that must be dedicated to the proposed event. Please be as accurate as possible. Please notify the Customer Service Coordinator Immediately if changes occur.

Starting Location of Event: _______________________________________

Ending Location of Event: _______________________________________

Estimated Number of Attendees: ________________ Estimated number of Vendors: ________________
Estimated number of Performers: ________________ Estimated number of Vehicles: ________________

Name of Organization: ____________________________________________

Non-Profit? Yes No IRS Organization type: (e.g. 501(c) (3)) _______________ Fed. Tax ID: _______________

Name of Applicant: ____________________________________________ Primary Phone: ________________

E-Mail Address: ____________________________________________ Secondary Phone: ________________

Is this Proposed Event held on Behalf of any Other Organization or Individual? Yes ______ No ______

Name of other Organization or Individual: ____________________________________________
Describe the event and state the purpose of event (Attach additional sheets if necessary):  

_______________________________________________________________________________________

_______________________________________________________________________________________

_______________________________________________________________________________________

Proposed route or layout for event (Attach a map or drawing):  

_______________________________________________________________________________________

_______________________________________________________________________________________

_______________________________________________________________________________________

_______________________________________________________________________________________

Describe the Event equipment included in layout. (Town does not provide equipment):  

_______________________________________________________________________________________

_______________________________________________________________________________________

_______________________________________________________________________________________

_______________________________________________________________________________________

What street closures are requested: (Closure of State Maintained Roads requires approval from NCDOT):  

_______________________________________________________________________________________

_______________________________________________________________________________________

_______________________________________________________________________________________

_______________________________________________________________________________________

Electricity required? Yes____ No_____  Do you plan to use amplified sound? Yes_____ No_____  

Please detail electrical and sound system requirements:  

_______________________________________________________________________________________

_______________________________________________________________________________________

_______________________________________________________________________________________

_______________________________________________________________________________________

Alcohol served? Yes_____ No_____

Final Clean up by: Town________ Organizer________

Organizer will provide: Sanitation _______ Can Liners _______ Trash Haul off_______ Other: ____________

Other Requirements:  

_______________________________________________________________________________________

_______________________________________________________________________________________

_______________________________________________________________________________________

_______________________________________________________________________________________

I have carefully read and will abide by the Special Events Support Policy of the Town of Newport and swear or attest that statements I made herein are true and correct to the best of my knowledge and belief.

(Signature) (Date)