

PART II. EVENT DESCRIPTION

Please provide diagram of street closures, barricade placement, electrical usage, location of trash receptacles and portable toilets.

PART III. EVENT CHECKLIST

<i>This event will include</i>	<i>You may need</i>	<i>Information that should help</i>
<input type="checkbox"/> Alcohol Dispensing		Contact the PLCB, and the Bureau of Codes.
<input type="checkbox"/> Barricades		Contact Streets and Parks.
<input type="checkbox"/> First Aid Station		Contact Susquehanna Health System.
<input type="checkbox"/> Food	Vendor license	Contact the Health Inspector via the Bureau of Codes.
<input type="checkbox"/> Parking Considerations	Permit parking	Contact Bureau of Police, and the Williamsport Parking Authority.
<input type="checkbox"/> Pyrotechnics	Special Event Permit	Contact the Fire Marshal at the Fire Dept. and the Bureau of Codes
<input type="checkbox"/> Street Closure	Special Event Permit	Contact the Bureau of Codes. Street closures require Liability Insurance .
<input type="checkbox"/> Tents	Tent Permit	Contact the Bureau of Codes.
<input type="checkbox"/> Trash	Dumpster/Container on street requires Special Event Permit.	Contact the Bureau of Codes for event permit. Contact local sanitation service for sanitation receptacles.
<input type="checkbox"/> Musical Performance	Special Event Permit	Contact the Bureau of Codes, Bureau of Police, and the Recreation Commission.
<input type="checkbox"/> Seating/Bleachers/Chairs		Contact Streets and Parks.
<input type="checkbox"/> Mass Transit/Shuttle Service		Contact City Bus. Use of any transportation requires applicant to show proof of Liability Insurance .
<input type="checkbox"/> Portable Toilets		Independent contractor
<input type="checkbox"/> Brandon Park	Special Event Permit	Any events or special activities require prior approval from the Recreation Commission and Brandon Park Commission.
<input type="checkbox"/> Portable Stage		Contact Streets and Parks, applicant must show proof of Liability Insurance .

PART IV. INFORMATION CHECKLIST

Event Sponsor should contact these departments directly for special needs:

DEPT.	CONTACT PERSON	PHONE	EVENT NEEDS
<input type="checkbox"/> Police Department	Chief Whiteman	327-7548	* Parade Escorts * Special Parking
<input type="checkbox"/> Fire Department	Chief Goodbrod Deputy Fire Marshal Heinbach	327-1602 327-7584	* Bonfires * Fire Extinguishers * Any Fire related activity
<input type="checkbox"/> City Bus	William Nichols John Kiehl	326-2500	* Shuttle Service * Mass Transit * Trolley Service
<input type="checkbox"/> Bureau of Codes	Jim Scheifley Deputy Fire Marshal Heinbach	327-7517 327-7584	* Vendors * Occupancy * Egress * Life/ Health/ Safety Issues
<input type="checkbox"/> Streets and Parks	William Wright John Markley	326-4684	* Barricades may be obtained from this office. Applicants are responsible for barricade placement. * Trash receptacles
<input type="checkbox"/> Williamsport Parking Authority	William Wright	326-6476	* Any activity in downtown area of Williamsport requiring parking.

A) NON-CITY SPONSORED EVENT APPLICANTS MUST SUPPLY THEIR OWN DIRECTIONAL SIGNS AND PROTECTIVE SERVICE LIGHTNING.

B) EVENTS INVOLVING COOKING OR OPEN FLAME REQUIRE THE PRESENCE OF FIRE EXTINGUISHERS AND PROPER LICENSING.

C) PRIVATE EVENTS REQUIRE THEIR OWN SECURITY.

PART V. FOOD VENDOR INFORMATION

- Please provide a complete list of all Food/ Craft Vendors.*
- If vendors do not submit a completed application, it could result in the vendor not participating in event.*
- All vendor applications must be submitted at least 1 week prior to event.*
- All applicable fees for food vendors must be paid prior to or day of event. NO EXCEPTIONS.*

PART VI. DEPARTMENT SIGNATURES

Signatures required depending on event, to obtain permit.

BUREAU OF POLICE

Police Chief: _____	Date: _____
	<input type="checkbox"/> Approved <input type="checkbox"/> Denied
Comments: _____	

FIRE DEPARTMENT

Fire Chief: _____	Date: _____
	<input type="checkbox"/> Approved <input type="checkbox"/> Denied
Comments: _____	

STREETS AND PARKS

Director: _____	Date: _____
	<input type="checkbox"/> Approved <input type="checkbox"/> Denied
Comments: _____	

BUREAU OF CODES

Deputy Fire Marshal: _____	Date: _____
	<input type="checkbox"/> Approved <input type="checkbox"/> Denied
Comments: _____	

RIVER VALLEY TRANSIT

Director: _____	Date: _____
	<input type="checkbox"/> Approved <input type="checkbox"/> Denied
Comments: _____	

WMSPT. PARKING AUTHORITY

Director: _____	Date: _____
	<input type="checkbox"/> Approved <input type="checkbox"/> Denied
Comments: _____	

BRANDON PARK COMMISSION

Approved Denied

RECREATION COMMISSION

Approved Denied

PART VII
Special Event Health License Application
Temporary Food Facilities Only

*A valid food vendor's license MUST be obtained from the City of Williamsport for all food and beverage vendors/stands that operate within the City.
Refer to Commonwealth of Pennsylvania Department of Agriculture Title 7,
Chapter 46, Food Code.*

Date of Application: _____

Name of Event: _____

Dates of Event: _____ to _____

Food Vendor Information:

Business Name: _____
Address: _____
City, State, Zip: _____
Telephone: _____ Mobile _____

Owner Name: _____
Address: _____
City, State, Zip: _____
Telephone: _____ Mobile _____

If the individual(s) operating the stand during the event is not the owner, complete the following:

Manager's Name	Daytime Phone	Evening Phone
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Food Information:

Are you a Food Vendor for: Profit Non-profit

Do you currently have a Food Vendor License: Yes No
If yes, please provide license number: # _____

If no, have you been registered in the past: Yes No

Please list the name(s) of employee(s) who are ServSafe Certified: _____

What type of food/beverage will be served/sold: _____

Where will the food be prepared: On Site Private Home Other

Kitchen, _____

Name of establishment

If other, where: _____

*If the food is prepared off site a copy of the current Health License for the facility or Department of Agriculture License **MUST** be attached.*

Tents and Canopies

Will a tent/canopy be used at the event: Yes No

All tents and canopies **MUST** be fire retardant and a copy of the fire retardant certificate must be submitted with permit application.

Any vendor who has a tent or canopy must have an approved "Tent Permit" for such structure.

Anyone who does not comply with the application and or does not obtain a "Tent Permit" will not be allowed to have any type of structure at the particular event.

Grills:

Will a gas grill be used? Yes No

All grills must meet the following requirements:

- Propane tank must be secured
- Grill must be placed in a safe, sturdy and stable location so as not to be bumped or tipped over.
- The use of grills, open flames, electric or fuel fired appliances require a fire extinguisher.

The following documents MUST be attached in order to process this application:

- Attach a copy of the PA Food Employee Certification card of event supervising staff.

Effective July 1, 2004, all for-profit food service providers are required to have one supervisory staff person in compliance with the Pennsylvania Food Employee Certification Act.

- A sketch or picture of the set up/layout must be attached, including all stands, tables etc. Please include a list of all equipment to be used at event.
- A detailed listing of proposed foods and/or menu.
- A list of Wholesaler's/Supplier's and their addresses and telephone number.

Please provide a diagram of the set-up of tents/canopies, grills, tents and tables below.

Office Use Only

Health Inspector	Date of Inspection
Total amount paid: \$ _____	Date paid: _____

Signature of person who verified all information. All information has been checked and vendor meets all criteria.