



CITY OF HOPEWELL SPECIAL EVENT APPLICATION REQUEST FORM

Today's Date: _____: TYPE OF EVENT REQUESTED _____

Individual/Company/Agency/Organization

Name: _____ 501 (c) (3): Yes ___ No ___

Website Address: _____

Contact Information

Name: _____ WK PH: _____ FAX: _____

Cell: _____ Email: _____

Mailing Address: _____ City: _____

State : _____ Zip Code: _____

EVENT DETAILS

Date of Event: _____ Start Time: _____ End Time: _____ Expected Attendance: _____

Description of Event: _____ Open to the Public? Yes: ___: No ___

Admission Fee? Yes ___ No: ___ Set-Up Date: _____ Set -Up Time _____

Location of the Event: _____ Insurance Attached ___ Yes: ___ No: ___

Food Service ___ Generator ___ Lane Closure ___ Media ___ Tent (s) _____

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Check All That Apply:

Alcohol Permit (Attach Copy): ___ Yes. ___ No: ___ Amplified Sound: Yes ___ No ___
Barricades ___ Dumpsters ___ Food Sales ___

Attach Detail Security Plan: _____ **Street Closure (Attach Diagram)** _____

Stage: ___ yes ___ No ___ Vendors: ___ Valet Service ___ Police Requested:
Yes: ___ No: ___ Restrooms ___ No Parking Signs ___ Permits: Yes ___ No ___
Applied For ___ or Received (Attach a copy) _____

Print Name _____ Signature _____ Date _____

COMMITTEE APPROVAL/SIGNATURE

Police: _____ Health Department: _____

Bureau of Fire: _____ Code/Building Official _____

Public Works: _____ Recreation: _____

Commissioner of the Revenue: _____ Safety/Risk Manager: _____

City Manager's Rep: _____

FINAL APPROVAL /DISSAPPROVING AUTHORITY

City Manager or Designative Representative _____ Date: _____

Note 1: Some Special Event Applications may require a legal review prior to approval/disapproval which may delay processing time. Any applicant may come and participate in the review process. It is not mandatory. The Special Events Application Review Committee meets every Tuesday at 11:00 A.M. Inside the Intergovernmental & Public Affairs Office, Second Floor, Room 220, Municipal Building (City Hall) located at 300 North Main Street, Hopewell, Virginia 23860. After completion, fax application to (804) 541-2248. PH: (804) 541-2270. Email: hbragg@hopewellva.gov.

Note 2: All Special Event Application Requests require an Insurance Certificate naming the City as a Co-Insurer unless a waiver is requested and granted by the City Manager or his designative representative.

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Note 3: To request Police Officers at an event, please fill out the attached Police Request Form and forward it to the Hopewell Bureau of Police. If approved, there is a cost associated with this request. There is no cost for Police Volunteers provided they are requested and are available.

Note 4: To request Barricades and Road Signs, please coordinate placement with the Department of Public Works. Regarding alcohol permits, you must contact the Commissioner of the Revenue's office.

Note 5: To request blocking off City Street(s) requires a signed signature page of those impacted by the streets closure as well as those who oppose the event. This signature page is required to accompany the application.

I have read and reviewed the entire application and understand the requirements to include all rules listed.

Print Name _____ Signature _____ Date: _____

(APPLICANT)

Questions _____

Questions _____

FINAL APPROVAL / DISAPPROVAL AUTHORITY

City Manager or designated Representative _____ Date: _____

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USE THIS PAGE FOR DIAGRAM OR STRIP MAP

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SECURITY PLAN

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CROWD CONTROL PLAN