

CITY OF



PO Box 112  
133 W 8th St  
Russell KS 67665  
Phone: (785) 483-6311  
Fax: (785) 483-4397

FEES		
Application Fee	\$25	
Electric Drop (includes usage) *Fee increase may be applicable if special needs are determined	\$150 each	
Polycart	\$10 each	
Dumpster	\$46.50 each	
Barricades	\$20	
Rope Standers	\$20	
Picnic Tables (includes up to 2)	\$25	
CMB Application (separate application)	\$225	
	<b>TOTAL</b>	

### SPECIAL EVENT APPLICATION

**A complete application, required documentation and payment must be submitted at least ten (10) days in advance of City Council Meeting, held on the 1<sup>st</sup> & 3<sup>rd</sup> Tuesday of each month at 4:30 P.M.**

**Applicants must have a representative at the Council meeting, or the application will not be approved.**

*Please note: no more than four (4) Special Event Permits may be issued in a calendar year to the same applicant.*

*Special Event Cereal Malt Beverage License (CMB) must be submitted in addition to Special Event Application if Cereal Malt Beverages are to be served.*

#### Event Information:

Event Name: \_\_\_\_\_

Purpose/Description of Event: \_\_\_\_\_

Event Date(s): \_\_\_\_\_

Event time(s): \_\_\_\_\_

Estimated Attendance: \_\_\_\_\_

Address: \_\_\_\_\_

Property Owner: \_\_\_\_\_

#### Applicant Information:

Name: \_\_\_\_\_

Company or Group: \_\_\_\_\_

Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Cell Phone Number: \_\_\_\_\_

E-mail Address: \_\_\_\_\_

**Event Type (check one):**

\_\_\_\_\_ Fundraising or non-commercial events for non-profit religious, educational, or community service organizations. (Certain fees may be waived at City Council discretion)

\_\_\_\_\_ Promotional or commercial events and activities intended to be for-profit, or public events intended primarily for entertainment or amusement, such as concerts or festivals.

**\*IMPORTANT\***

Parades require a separate completed application and cannot be combined with any special event applications; however, if submitted together, the parade application fee may be waived.

**Event Details (must be completed entirely):**

**\*Applicant must visit with each Department Head and they acknowledge their approval prior to submitting\***

• **Electric Department**

- What will electric drop be used for?: \_\_\_\_\_
- Electric Drop – # \_\_\_\_\_
- Voltage Needed \_\_\_\_\_ Amps \_\_\_\_\_ Location \_\_\_\_\_

• **Public Works**

- Polycarts - # \_\_\_\_\_
- Dumpsters - # \_\_\_\_\_
- Rope Stenders - # \_\_\_\_\_
- Picnic Tables - # \_\_\_\_\_
- Barricades – # \_\_\_\_\_
  - Placement of Barricades/Streets to Block Off - \_\_\_\_\_

• **Police Department**

- Explain provisions for parking and security. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

• **Fire Department**

- Explain provisions for fire prevention/safety. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

- Applicant must ensure even area is maintained and fully cleaned immediately at the events' conclusion. Describe proposed site maintenance. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

- Provide point of contact and working phone number for site maintenance/clean-up:

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- If adequate public restrooms are unavailable, applicants must provide at least two (2) portable toilets for every 100 attendees. If alcohol is consumed at the event, applicant must provide at least three (3) portable toilets for every 100 attendees. Number of portable toilets required doubles for events lasting more than four (4) hours.

- Number of portable toilets to be provided: \_\_\_\_\_
- Portable toilet provider/disposal contractor contact information:

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- List any mobile food vendors associated with this proposed event.

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**GRAPHIC DESCRIPTION (Required):**

**Must provide an aerial photograph or site plan of the area. Map/illustration must be detailed and show where all items/services will be or need to be placed in addition to:**

- Location and dimensions of the event area
- Location and dimensions of any structures (tents, stages, etc.) used for the event
- Location of requested amenities
- Any other information which pertains to the event

**BUSINESS/INDIVIDUAL SIGNATURES (Required):**

Blocking public access to businesses or residences requires signatures from all affected by such closure or event. List out business name or Individual then acquire their signature beside it. Use back of paper if more space is needed.

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Police Dept. \_\_\_\_\_ Fire Dept. \_\_\_\_\_ Public Works \_\_\_\_\_  
 Electric Dept. \_\_\_\_\_ City Clerk \_\_\_\_\_

**For Office Use Only:**  
 Date Remitted: \_\_\_\_\_ Cash/CC/Check# \_\_\_\_\_ Receipt# \_\_\_\_\_  
 Permit Number: \_\_\_\_\_ Date Approved: \_\_\_\_\_