

CITY OF CULLMAN

204 2nd Ave NE
Cullman, Alabama 35055

(256) 775-7102
cityhall@cullmanal.gov

P.O. Box 278
Cullman, Alabama 35056

SPECIAL EVENT PERMIT REQUEST FORM

SECTION 1 | GENERAL INFORMATION

DATE OF REQUEST: 10/21/21

REQUESTING ORGANIZATION/BUSINESS:

Chamber of Commerce

CONTACT PERSON:

Keith Varden

ADDRESS: 301 2nd Ave SW

Cullman AL 35055

PHONE: 256 734 0154

FAX: _____

EMAIL: Kvarden@cullmanchamber.org

TYPE OF EVENT:

5K/10K Run | Walk | Race | Ride for
Raising Funds or Awareness

Festival

Concert

Block Party

Protest/Picket

Rally/Assemblage

Film/Photo Session

Other Christmas Open House

IS THIS A 501(c)(3) CHARITY EVENT?

NO

YES (Enter 501(c)(3) number below.)

- FOR ADMINISTRATIVE USE ONLY -

DATE RECEIVED IN OFFICE: OCT 21 2021 PH

MAYOR'S OFFICE INITIAL REVIEW

Approved Conditionally Approved Denied

COMMENTS/CONCERNS: _____

Woody Jacobs
MAYOR

10/22/21
DATE

POLICE DEPARTMENT'S INITIAL REVIEW

Approved Conditionally Approved Denied

COMMENTS/CONCERNS: _____

Craig Montgomery
POLICE CHIEF OR DESIGNEE

21 Oct 21
DATE

FIRE RESCUE'S INITIAL REVIEW

Approved Conditionally Approved Denied

COMMENTS/CONCERNS: _____

B B
FIRE CHIEF OR DESIGNEE

10/22/21
DATE

CPRST INITIAL REVIEW

Approved Conditionally Approved Denied

COMMENTS/CONCERNS: _____

[Signature]
CPRST DIRECTOR OR DESIGNEE

10/21/2021
DATE

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SECTION 2 | DETAILED EVENT INFORMATION

DATE(S) OF EVENT: Nov 12-14 TIME(S) OF EVENT: Fri + Sat - 10-5
Sund 1-5

DETAILED DESCRIPTION OF EVENT: Christmas open House / The Warehouse District
District is wanting to close their street for this shopping weekend

NOV 12 + 13 10am - 5pm NOV 14th 1-5pm

LOCATION OF EVENT (check all that apply):
 Public Street and/or Sidewalk
 A Park or Recreational Facility
 Private Property Owned by You or Your Organization
 Private Property Owned by a Third Party
 Other _____

IF THE EVENT LOCATION IS A CITY PARK OR RECREATIONAL FACILITY, HAVE YOU CONTACTED CULLMAN PARKS, RECREATION, & SPORTS TOURISM TO RESERVE? The event coordinator MUST reserve and schedule the use of a city park or facility through CPRST prior to submitting this application. (See **PAGE 10**.)

NO YES N/A because event is not in a park or recreational facility

- If the event location is public property owned by another government entity, the event coordinator MUST schedule the use of said property through the appropriate office and attach proof to this application.
- If the event location is private property owned by a third party the event coordinator must obtain permission from the property owner and have the property owner or representative sign **PAGE 7**.

Give precise event location details (i.e. address, route, etc.) 1st Ave NE from Lewis
to Flavors Bakery

WILL YOUR EVENT INCLUDE AMPLIFIED MUSIC/SPEAKING OR OTHER NOISE?

NO YES | Describe: _____

NOTE: Events involving amplified music, speaking, or other excessive noise as defined by the city's noise ordinance shall conclude by 10 PM unless otherwise noted. Noise complaints received will be investigated.

WILL ALCOHOL BE SERVED DURING THIS EVENT?

NO YES | Event Coordinator is responsible for contacting the City Clerk's Office and any other applicable office to obtain the necessary permits, licenses, and permissions.

WILL YOUR EVENT INCLUDE FOOD OR DRINK VENDORS?

NO YES | Event Coordinator is responsible for contacting the City Clerk's Office, Cullman County Health Department, and other applicable offices to obtain the necessary permits, licenses, and permissions.

WILL YOUR EVENT INCLUDE VENDORS OR CRAFTS OR OTHER ITEMS?

NO YES | The event coordinator is responsible for contacting the City Clerk's Office and any other applicable office to obtain the necessary permits, licenses, and permissions.

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SECTION 3 | CITY SERVICES REQUESTED/REQUIRED

EVENT COORDINATOR IS RESPONSIBLE FOR COORDINATING AND PAYING COSTS ASSOCIATED WITH ANY ASSISTANCE NEEDED FROM CITY DEPARTMENTS ONCE THE EVENT IS APPROVED.

A. ARE YOU REQUESTING THE CLOSING OF ANY PUBLIC STREET OR SIDEWALK?

NO | Skip to Question B.

YES | Approval of all property owners/managers or residents affected by the street/sidewalk closing is required. **PAGE 5** of this application **MUST** be completed (**REQUIRED**).

List all streets and/or sidewalks you request to be closed below (attach map, if necessary): _____

Will you require the use of city-owned barricades? YES NO

NOTE: The event coordinator shall be responsible for contacting the Street Department upon approval of the event to reserve and arrange the use of city-owned barricades. Contact information is on **PAGE 10**.

B. WILL YOU REQUIRE, OR ARE YOU REQUESTING, POLICE SERVICES?

- **EVENTS WHICH INCLUDE THE SERVING ALCOHOL REQUIRES A MINIMUM OF 2 OFFICERS ON SITE.** -

NO | Skip to Question C.

REQUIRED | Answer the following questions.

REQUESTED | Answer the following questions.

UNSURE

(Contact the Police Department or skip to Question C.)

OFF DUTY POLICE RATES PER HOUR

\$30.00 | NORMAL RATE

\$35.00 | RATE IF ALCOHOL SERVED

- MINIMUM 4 HOURS -

- **POLICE CHIEF HAS FINAL DISCRETION ON WHETHER POLICE SERVICES ARE REQUIRED** -

How many officers you request? 2 (Police Chief will have final discretion.)

C. ARE YOU REQUESTING FIRE/EMT SERVICES?

NO | Skip to Question D.

YES | Answer the following questions.

How many firefighter/EMTs do you request? 2
(Fire Chief will have final discretion.)

OFF DUTY FIRE/EMT RATES PER HOUR

\$30.00 | NORMAL RATE

\$35.00 | RATE IF ALCOHOL SERVED

- MINIMUM 4 HOURS -

- **AMBULANCE TRANSPORT IS NOT INCLUDED.** -

NOTE: If an ambulance is required, the event coordinator will be responsible for contacting the ambulance service of choice to ensure ambulance coverage for the event.

D. ARE YOU REQUESTING PERMISSION FOR THE USE OF PORTABLE TOILETS?

NO **YES** | The event coordinator shall be responsible for contacting the Cullman County Health Department and the Cullman Building Inspection Department. Contact information is on **PAGE 10**.

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BY SIGNING BELOW, YOU ACKNOWLEDGE:

1. That you have read and understand the procedures and regulations regarding special events.
2. That you understand and agree to abide by these procedures and regulations as well as any other rules, regulations, and laws that pertain to your event.
3. That you understand that it is you're responsibility to contact the appropriate department(s) if assistance is needed, and that you agree to pay the costs that may be associated with any departmental assistance.
4. That you understand submitting this Special Event Permit Request is not a guarantee that your request will be approved.
5. That this application is complete and that the information contained in the application is true and correct to best of your knowledge.



Signature of Requesting Party/Event Coordinator

10-21-21

Date

Keith Vanden

Printed Name

Events Director

Title

Cullman Chamber of Commerce

Business or Organization Name (if applicable)

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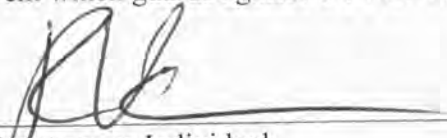
- AGREEMENT -

I(we) the undersigned acknowledge that I(we) have read and understand the current Order of the State Health Officer, Proclamation of the Governor on COVID-19 and ordinances of the City of Cullman and I(we) agree to comply with the restrictions therein, including but not limited to the requirements to maintain a consistent six-foot distance(social distance) between persons from different households, facial coverings, etc., as required. I(we) further agree to communicate and enforce the restrictions to all persons who attend the event.

I(we) agree to limit the participants to the event in accordance with State and City guidelines, so as to comply with any COVID-19 or other orders of the State and City.

I (we) agree to provide the City of Cullman with a written plan of action describing the measures that will be used to ensure compliance with the current Order of the State Health Officer. I(we) understand that the City of Cullman recommends researching the current local Covid-19 conditions when making a decision to postpone a special event. The City or State has the right to cancel, postpone, or make such limitations on the event as necessary to comply with the then current State Health Officer's order and shall not be liable for any of the undersigned's loss, damage, or inconvenience due to such action.

The City of Cullman is not obligated to or responsible for any infectious complications that may occur due to my special event and the undersigned takes full liability, if any, for any such complications and indemnifies and holds the City of Cullman, its officials, agents, employees, and contractors harmless from any liability whatsoever, concerning the special event. It is the intent of the undersigned to provide an event which guards against COVID-19 spread, protecting the public health and human life.



Signature, as Individual

Keith Varden

Printed Name

Events Director

Title/Position, as Individual

10/21/21

Date

Signature, as Individual

Printed Name

Title/Position, as Individual

Date

-THIS AGREEMENT MUST BE SIGNED BEFORE THE APPLICATION CAN BE PROCESSED.-