



**PUTNAM MUNICIPAL CENTER
TOWN CLERK
200 School Street
Putnam, CT 06260
860-963-6807**



SPECIAL EVENT PERMIT APPLICATION

FOR OFFICIAL USE ONLY

Date Rec'd: _____ Date Issued: _____ Permit # _____

Review Required: Board of Selectmen, Building Official, Emergency Management, Fire Marshal,
Town Clerk, Parks & Recreation, Public Works, Putnam Police Department

*Town Clerk Approval: _____ Date: _____

EVENT MUST ADHERE TO ALL STATE OF CONNECTICUT COVID-19 REGULATIONS

Submit completed Special Event Permit minimum of 45 days prior to the event. The Special Event Permit \$100.00 non-refundable application fee is due at the time of application. Acceptable forms of payment: Cash, Certified Bank Check or Money Order. No personal checks. Applicant to be liable for any overtime for Town employees or other extraordinary expenses incurred by the Town as a result of the special event.

APPLICANT INFORMATION

Event Name		
Event Date/s		
Event Times:		
Location (please be specific)		
Applicant Name		
Street Address		
Town, State, Zip Code		
Day Phone		
E-Mail Address		
Sponsoring Organization		
Contact Person On-Site Day of Event/Emergency Contact	Name	Cell Number
Tax Exempt Id Number if Applicable		
Are You a Charitable/non-Profit Organization? Yes or No (circle one)	If yes, Enter Ct State Tax Exempt #	Please Include a copy of your current 501 (c)(3) with application.

EVENT TYPE

- CONCERT
- CYCLING EVENT
- FAIR/CARNIVAL
- FESTIVAL
- FUNDRAISER
- PARADE
- PERFORMING ARTS
- PROMOTIONAL
- RUN/WALK
- SPORTING EVENT
- OTHER: Please describe

***Board of Selectman Approval** _____**Date:** _____**EVENT HISTORY**

Has this event been produced before? Yes/No

If yes, when and where?

Annual event? Yes/No

EVENT DESCRIPTION

Describe event, attach site map, indicate boundaries, location of tents, activity areas, portable restrooms etc.

EVENT TIMELINE

Attach a timeline, sequence of events, including equipment deliveries, set-up and tear down.

ADMISSIONS/VENDORS

Will items or services be sold at the event? If yes, describe.

ALCOHOL/FOOD

Does event include the sale or consumption of alcohol? Yes/No If yes, describe and attach copy of your state permit.

Will vendors cook or heat food? If yes, describe. **NOTE:** Compliance with Health Department required.**AMPLIFIED SOUND**

Will the event have amplified sound? If yes, describe. Noise restrictions may apply.

ANIMALS

Will your event include animals (petting zoo, pony rides, dog/walk run) If yes, describe.

FIREWORKS

Will there be fireworks at the event? If yes, provide company name, contact, email and phone.

FIRST AID

Will you require additional fire department staffing? If yes, describe. The Town may require additional staffing. Please describe your First Aid plan of action.

INFLATABLESWill event provide inflatables? If yes, describe. **NOTE:** No staking into ground.

POWER

Does the event require electricity? If yes, describe.

Does the event require generators? If yes, describe and indicate provider

Will there be handling of vehicle fuel? If yes, describe.

POLICE/SECURITY

Are you requesting additional police staffing? If yes, describe. The Town may require additional safety measures.

Does this event require overnight security? If yes, indicate provider.

***Putnam Police Department Approval _____ Date: _____**

SIGNAGE

Will your event use and post signage, banners or a-frames? If yes, describe desired locations and timeline requested.

STAGES/STRUCTURES/TENTS

Main Street Events are limited to 10 x 10 popup tents. Special permission is needed otherwise.
Fire & Ice Events – a maximum of 2 Oversized tents permitted in Union Square Parking lot.

Does event include enclosures such as tents or canopies? If yes, describe, include dimensions and types of activities within the structure.

Will your event construct stages or other improvements? If yes, describe.

Will there be any fenced areas? If yes, describe and indicate on site map/plan submitted with application.

***Building Official Approval _____ Date: _____**

TRAFFIC CONTROL/IMPACTS

Please describe any requested street closures and/or sidewalk closures. Attach a traffic plan.

Name of Street	Date/Hour Start Time	Date/Hour End Time

***Putnam Police Department Approval _____ Date: _____**

VOLUNTEERS

Will your event function with volunteers? If yes, describe.

WASTE/WATER

Will you provide portable restrooms, sinks, hand-washing stations? Yes/No If yes, how many?

Will you provide garbage/recycling? Yes/No If yes, how many?

NOTE: Waste Management Inc., is the Town of Putnam waste provider.

APPLICATION CHECKLIST

- \$100. Application fee (non-refundable) Cash, Certified Bank Check or Money Order. No personal checks.
- Business License (copy)
- Certificate of Insurance
- Event Timeline
- Liquor Permit
- Parking Agreement
- Site Map
- State Permit – if Alcohol / Food
- Tent Permit - if needed
- Traffic Plan/Route

INSURANCE REQUIREMENT

A Certificate of Insurance naming the Town of Putnam as an Additional Insured in the minimum amount of \$1 million per occurrence and \$2 million general aggregate is required but may be more if the Town determines it necessary for the proposed event. This certificate must be submitted and be acceptable to the Town prior to receiving the Special Event Permit.

OTHER PERMITS AND FEES

Depending upon the nature and scope of the proposed event, other permits may be required as determined through the application process. Other fees may be assessed (i.e. fire, aid and/or police services). The Town of Putnam will make every effort to assist the applicant in determining complete permit requirements, though once identified, it will be up to the applicant to provide required and approved documentation where deemed appropriate.

EVENT MUST ADHERE TO ALL STATE OF CONNECTICUT COVID-19 REGULATIONS

HOLD HARMLESS STIPULATION – Must be submitted with application

Permittee covenants and agrees to indemnify, defend and hold harmless the Town, its officers, agents and employees from any and all claims actions, damages, liability, cost and expense, including reasonable attorney’s fees in connection with or occasioned, in whole or in part by any act or omission of Permittee, its officers , agents, employees, customers or licenses, or arising from or out of Permittee’s failure to comply with any provision of the Special Event Permit granted as a result of this application, regardless of whether it is alleged or proven that the acts or omissions of the Town, its officers, agents or employees caused or contributed hereto.

Printed Name, Title		Date
Signature of Authorized Representative		

NOTE: This application may be denied if the proposed activity disrupts traffic beyond practical solution; causes undue hardship to surrounding residents or businesses; requires the diversion of so many public employees that service is denied to the public at large; or fails to fall within Town standards. The permit may also be rescinded at any time if complete and accurate information was not provided on the application; if the event is not held within the terms of the permit; or if there is failure to comply with applicable legal requirements.