

## THE CITY OF CEDAR HILL SPECIAL EVENT PERMIT APPLICATION

Return completed application to the police department no less than 30 days prior to the first day of your event. If you email or fax your completed application in, you will be required to mail your notarized original as well.

Mail to: City of Cedar Hill

Police Department 285 Uptown Blvd. Cedar Hill, TX 75104

**Drop off:** Cedar Hill Government Center

Police Department

285 Uptown Blvd., Bldg. 200 Cedar Hill, TX 75104

Email: Colin.Chenault@cedarhilltx.com

**Fax:** 972-291-5169

The City of Cedar Hill requires a special event permit for a temporary gathering or organized activity, including but not limited to parades, bike races, marathons, walk-a-thons, fireworks displays, concerts, carnivals or other types of races and festivals on private or public property which involves any of the following:

- Closing a public street
- Blocking or restricting use of public property or street
- A gathering of more than 100 people from the general public
- Sale of merchandise, food or beverage on public property
- Erection of a tent for public gatherings on public property
- Installation of a stage, band hall, trailer, van, portable building, grandstand or bleachers for public gatherings on public property
- Placement of temporary no parking signs in a public right-of-way
- Use of a public park in its entirety

The special event permit application will be reviewed by the City of Cedar Hill; you will be contacted about your event's approval status.

Permit will not be approved until all of the required information, fees & deposits have been received.

Approval is not guaranteed. \*Please do not advertise your event prior to receiving your permit approval. We will not accept an incomplete permit application.

This application must be turned in 30 days prior to the event

## SPECIAL EVENTS PERMIT APPLICATION

CEDAR HILL POLICE DEPARTMENT 285 Uptown Blvd., Building 200 Cedar Hill, TX 75104



| ١.  |                                                                                                                                                                                                                            |                                       |                                                         |                     |                                                              |                      |              |  |  |
|-----|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------|---------------------------------------------------------|---------------------|--------------------------------------------------------------|----------------------|--------------|--|--|
|     | Name of person requ                                                                                                                                                                                                        | esting permit (applica                | nnt)                                                    |                     | Date of application                                          |                      |              |  |  |
| 2.  |                                                                                                                                                                                                                            |                                       |                                                         |                     | Bus.                                                         | Res.                 |              |  |  |
|     | Address (including zip                                                                                                                                                                                                     | code) of applicant                    |                                                         | Phor                | ne number (w/area code)                                      |                      |              |  |  |
| 3.  |                                                                                                                                                                                                                            |                                       |                                                         |                     |                                                              |                      |              |  |  |
| ٥.  | Name of organizati                                                                                                                                                                                                         | on firm or corpora                    | tion on whose behalf                                    |                     | Applicants position                                          | with requesti        | na           |  |  |
|     | application is made                                                                                                                                                                                                        |                                       |                                                         |                     | organization                                                 | wiiiTrequesii        | ng .         |  |  |
| 4.  |                                                                                                                                                                                                                            | <del>, (1.0.40.0019.01.901</del>      | 237                                                     |                     | 51.gan.n2am511                                               |                      |              |  |  |
|     | Address (including zip                                                                                                                                                                                                     | code) of requesting                   | organization                                            |                     | Phone number (w/are                                          | ea code) of orc      | ganization   |  |  |
| 5.  |                                                                                                                                                                                                                            |                                       |                                                         |                     |                                                              |                      |              |  |  |
| J.  | Email address of perso                                                                                                                                                                                                     | on requesting permit (                | applicant)                                              |                     |                                                              |                      |              |  |  |
| ,   |                                                                                                                                                                                                                            |                                       |                                                         | D. 4                | D                                                            | . Uma                | A Alice      |  |  |
| 6.  | Date & day of the we                                                                                                                                                                                                       | ek of the event                       | AM_<br>Starting Time                                    | <u>PM</u>           | Estimated length of ti                                       | Hrs.<br>me for event | Mins.        |  |  |
|     |                                                                                                                                                                                                                            |                                       |                                                         |                     |                                                              |                      |              |  |  |
| 7.  | Brief description of ev                                                                                                                                                                                                    | ent                                   |                                                         |                     |                                                              |                      |              |  |  |
|     | bilet description of ev                                                                                                                                                                                                    | CIII                                  |                                                         |                     |                                                              |                      |              |  |  |
| 8.  | Official research                                                                                                                                                                                                          | -1                                    |                                                         |                     | Yes                                                          | No                   |              |  |  |
|     | Official name for ever                                                                                                                                                                                                     | 11                                    |                                                         |                     | Solicitation of mon-<br>services will be invo                |                      | /or          |  |  |
|     |                                                                                                                                                                                                                            |                                       |                                                         |                     | services will be invo                                        | olvede               |              |  |  |
| 9.  | Address(es) or block r                                                                                                                                                                                                     | number(s) and street(s                | s) to be used for assembly                              |                     |                                                              |                      |              |  |  |
|     | 71441033(03) 01 210011                                                                                                                                                                                                     |                                       | , 10 00 000 a 101 assortion                             |                     |                                                              |                      |              |  |  |
| 10. | Address(as) or block r                                                                                                                                                                                                     | number(s) and street r                | name(s) of dispersal area                               |                     |                                                              |                      |              |  |  |
|     | Address(es) of block i                                                                                                                                                                                                     | iomber(s) and sireer                  | idine(s) of dispersal dred                              |                     |                                                              |                      |              |  |  |
| 11. |                                                                                                                                                                                                                            |                                       |                                                         |                     |                                                              |                      |              |  |  |
|     | Estimated number of                                                                                                                                                                                                        |                                       |                                                         |                     | without riders), animal-                                     |                      |              |  |  |
|     | persons expected to participate in even                                                                                                                                                                                    |                                       |                                                         |                     | units or organizations sureas. Vaccine records               |                      |              |  |  |
| 12  | How many barricades                                                                                                                                                                                                        |                                       |                                                         | -                   | provide them?                                                |                      |              |  |  |
|     |                                                                                                                                                                                                                            | s, cories do you expec                |                                                         | 110** *****         | provide mem.                                                 |                      |              |  |  |
| 13. | □Yes □ No                                                                                                                                                                                                                  |                                       |                                                         |                     | dinances or by state law fo                                  |                      | of this      |  |  |
| 14. | □Yes □ No                                                                                                                                                                                                                  |                                       |                                                         |                     | of all licenses and permits<br>ent including proposed stru   |                      | ences,       |  |  |
|     |                                                                                                                                                                                                                            | barricades, signs                     | s, banners and restroom fo                              | acilities.          | -                                                            |                      |              |  |  |
|     | $\square$ Yes $\square$ No                                                                                                                                                                                                 |                                       |                                                         |                     | g" signs will be used. Addi<br>r parking behind Amphithe     |                      | y be         |  |  |
|     | □Yes □ No                                                                                                                                                                                                                  | How applicant will p                  | provide security and fire, n                            | nedical and tra     | ffic control (Attach all cop                                 | pies of certificat   | es and       |  |  |
|     | licenses of personnel)                                                                                                                                                                                                     |                                       |                                                         |                     |                                                              |                      |              |  |  |
|     | □Yes □ No                                                                                                                                                                                                                  |                                       |                                                         |                     | g, 100a, alcoholic beveraged<br>ad (attach copies of certifi |                      |              |  |  |
|     |                                                                                                                                                                                                                            | required)                             |                                                         |                     | ,                                                            |                      |              |  |  |
|     | □Yes □ No<br>□Yes □ No □ N/A                                                                                                                                                                                               |                                       | pplicant will clean up the<br>m assembly point to dispe |                     | er the special event if on p                                 | ublic property       |              |  |  |
|     | □ Yes □ No                                                                                                                                                                                                                 |                                       |                                                         |                     | \$1,000,000 per occurrence                                   | & \$500,000 da       | mage to      |  |  |
|     |                                                                                                                                                                                                                            | rented premises                       |                                                         |                     |                                                              |                      |              |  |  |
|     | ☐ Yes ☐ No Promotionals – please provide a copy of any promotionals to be distributed regarding your event ☐ Yes ☐ No Applicant acknowledges and agrees to allow the City to publish the contact person and media referral |                                       |                                                         |                     |                                                              |                      |              |  |  |
|     | Yes No Applicant acknowledges and agrees to allow the City to publish the contact person and media referral telephone numbers on the internet in conjunction with the Calendar of Upcoming Events if they so choose to     |                                       |                                                         |                     |                                                              |                      |              |  |  |
|     |                                                                                                                                                                                                                            | do so. If you hav                     | . 0                                                     | uld like us to link | through our calendar, ple                                    | ease provide yo      | our internet |  |  |
|     | □Yes □ No                                                                                                                                                                                                                  |                                       |                                                         | Department wil      | l assess a facility attendar                                 | nt fee of \$45 per   | r hour per   |  |  |
|     |                                                                                                                                                                                                                            | attendant for all                     | events in the parks deem                                | ed necessary        |                                                              |                      |              |  |  |
|     | ☐Yes ☐ No                                                                                                                                                                                                                  | Payments/Fees – all<br>being approved |                                                         | nts and fees mu     | st be paid in advance of t                                   | ne special ever      | nt permit    |  |  |
|     |                                                                                                                                                                                                                            | being approved                        |                                                         |                     |                                                              |                      |              |  |  |



The permit holder must remain in compliance of the city's noise ordinance, No 2003-185, during the event. A copy of this ordinance is available at City Hall, the Police Station, the Library or by accessing the city website, www.cedarhilltx.com.

| his application must be signed by the applicar      | nt and sworn to befor              | re an officer authorized                | to administer oaths. (Notary I | 'ublic)   |  |  |  |
|-----------------------------------------------------|------------------------------------|-----------------------------------------|--------------------------------|-----------|--|--|--|
|                                                     |                                    |                                         |                                |           |  |  |  |
|                                                     |                                    | Applicant                               |                                |           |  |  |  |
|                                                     |                                    |                                         |                                |           |  |  |  |
| cribed and sworn to before me, this the             | day of                             |                                         | , A.D. 20                      | , A.D. 20 |  |  |  |
|                                                     |                                    |                                         |                                |           |  |  |  |
|                                                     |                                    | Notary Public in a<br>Dallas County, Te | and for<br>exas                |           |  |  |  |
| APPROVED BY POLICE CHIEF                            |                                    | DATE                                    |                                |           |  |  |  |
|                                                     |                                    |                                         |                                |           |  |  |  |
| DISAPPROVED BY POLICE CHIEF                         |                                    | DATE                                    |                                |           |  |  |  |
| DEPARTMENT APPROVALS                                |                                    |                                         |                                |           |  |  |  |
| Animal Shelter Building/Code Enforcement Fire Other | Library<br>Neighbork<br>Parks & Re | nood Services<br>ecreation              | Police Public N                |           |  |  |  |