



APPLICATION FOR A SPECIAL EVENT PERMIT

Date of Application: 09/18/19

Event Title or Type: Trunk and Treat

Location of Event: 400 blk Race Street, Cambridge, MD 21613 including Cannery Park

Date(s) of Event: 10/24/2019

Hours of Event (Actual): 6 p.m. - 8 p.m.

Name of Applicant: Chief Mark Lewis Title: Chief of Police

If representing an organization or company, name(s): Cambridge Police Department

Signature of Applicant: _____

If application is presented on or behalf of 1 or 2 businesses only, list names of business(es):

Address of Applicant: PO Box 255, 8 Washington St., Cambridge, MD 21613

Telephone: 410-901-8446 Email: mlewis@cambridgepd.org

Expected attendance: 300

Is a street closing being requested? Yes (show on map) No

If yes, what street(s) Race St. from Muir St. to Gay St.

If yes, indicate street closure & reopen times

(include set up and breakdown time): 5:30 p.m. - 8:15 p.m.

Is staging or a platform required? Yes (show on map) No Amplification: Yes No

If event is on private property, name of Property Owner: _____

Will trash barrels & pick-up be provided by event holder? Yes No

Will portable toilets be provided? Yes (show on map) No

Will tent(s) be erected? Yes (show on map) No

Will food be prepared on the premises? Yes No

Will food trucks be present? (list names on back of form) Yes No

Will alcohol be served? Yes No



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ROAD RACE, WALK-A-THON, ETC.

On Roadway? Yes No

On Sidewalk? Yes No

Will temporary signs be posted? Yes No

Signs must be removed by the following business day; no paint is allowed on streets or sidewalks.

Specific Route:

I attached a map showing locations of street closures, vehicles and temporary structures.

For new events, I have attached documentation of notification of the application to all affected businesses and residents, and attest that a majority have supported and/or not objected to this event.

I have read & agree to the City's Street Closures Policy.

FOR OFFICE USE ONLY

Conditions of Special Event Permission: _____

Police Costs: \$ _____ DPW Costs: \$ _____ Other Costs: \$ _____

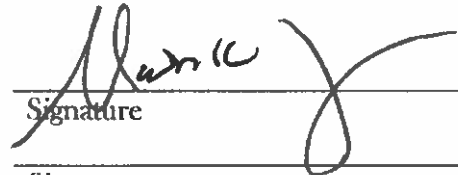
TOTAL COSTS REQUIRED BY CITY COUNCIL: \$ _____

Recommendations:

Cambridge Police Department Approval Denial

Rescue Fire Department Approval Denial

Public Works Department Approval Denial



Signature

Signature

Signature

