



# APPLICATION FOR A SPECIAL EVENT PERMIT

Date of Application: 10/7/19

Event Title or Type: Trunk-A-Treat, giving out candy from the <sup>car</sup> trunk

Location of Event: 815 Center Street Cambridge MD. 21613

Date(s) of Event: 10/31/19

Hours of Event (Actual): 5 PM to 9 PM

Name of Applicant: (Elder) Gregory Aldridge Title: Elder

If representing an organization or company, name(s): Agape Temple of Praise & Ministries, INC

Signature of Applicant: (Elder) Gregory Aldridge

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

Address of Applicant: 305 Race street P.O. Box 262 Vienna, MD 21869

Telephone: 410-901-7888 Email: decongreg01@yahoo.com

Expected attendance: 60

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

If yes, what street(s) Center Street (Half of the Street) Cambridge MD 21613

If yes, indicate street closure & reopen times (include set up and breakdown time): from corner of Center and Rubbin to middle of Center Street 4 PM to 9 PM

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  Mark J  
Signature

Rescue Fire Department Approval  Denial  \_\_\_\_\_  
Signature

Public Works Department Approval  Denial  Eden L. Whelf  
Signature