



APPLICATION FOR A SPECIAL EVENT LICENSE

Date of Application: March 25, 2017

Event Title or Type: Annual Meeting (Picnic)

Location of Event: Long Wharf Park (gazebo and area surrounding)

Date(s) of Event: June 4, 2017
June 25, 2017 rain date Hours of Event: request 1:00 pm to 5:00 pm, event from 2:00 pm to 4:00 pm

Organization/Corp. Name: West End Citizens Association, Inc.

Signature of Holder of Event: Marion Thomas

Printed Name: Marion Thomas Title: Acting President

Address of Holder of Event: P. O. Box 13, Cambridge, Maryland

Business Telephone: 410-901-1300 Residence Telephone: 410-228-2197

Email Address: marionthomas@comcast.net

Is Organization Non-Profit? Yes No Is there a charge for admission? Yes No

Is event to on City, State, or Private Property? City If private, name of owner: _____

Are you requesting the city to provide trash containers? Yes No

**Request permission to use secured marina bathrooms.

Is water available at event? Yes No

If yes, list source of water (i.e. fire hydrant, Great Marsh, Sailwinds, etc.): fire hydrant, yacht basin

Will a tent be erected? Yes No (Include on plan) **Undetermined at this time.

Expected Attendance: 50 Venue Seating Capacity: N/A

Is parking available: Yes No For how many vehicles? unknown, most will walk

Is staging or platform required? Yes No Amplification? Yes No

List types of musical instruments: Guitars

Are required approvals attached, e.g., State, County: Yes No N/A

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

If yes, indicate closure time (consider set up and breakdown time): _____

Will food be prepared on the premises? Yes No

If yes, is County Health Dept. Inspection Approval attached? Yes No

Will alcohol be served? Yes No

If yes, please attach a copy of the county liquor license

If no, please submit a copy after you receive it

ROAD RACE, WALK-A-THON, ETC.

On Roadway Yes No

On Sidewalk Yes No

Will notification be made to residents along the route? 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: _____

-FOR OFFICE USE ONLY-

City Manager Approved/Denied: _____ Date: _____

Special Conditions, if : _____

Police Detail Estimated Cost: \$ _____ DPW Personnel Estimated Cost: \$ _____

Cambridge Police Department: Approved: Denied: Signature: 

Rescue Fire Department: Approved: Denied: Signature: _____

Department of Public Works: Approved: Denied: Signature: 