



APPLICATION FOR A SPECIAL EVENT LICENSE

Date of Application: 3/29/17
Event Title or Type: JUNETEENTH FESTIVAL
Location of Event: 600 BLOCK PINE STREET
Date(s) of Event: JUNE 17, 2017
Hours of Event: 1-5 P.M.
Organization/Corp. Name: PINE STREET COMMITTEE, INC.
Signature of Holder of Event: Portia Johnson-Ennels
Printed Name: PORTIA JOHNSON-ENNELS Title: TREASURER
Address of Holder of Event: 700 CORNISH DRIVE CAMBRIDGE, MD 216132123
Business Telephone: 410-901-1397 Residence Telephone: 410-228-7990
Is Organization Non-Profit? Yes No Is there a charge for admission? Yes Yes No
Is event to on City, State, or Private Property? _____ Name of Property Owner: _____
Will Trash Barrels & Pick-up be provided: Yes No If outdoors, will toilet facilities be provided? Yes No
Is water available at event? Yes No
If yes, list source of water (i.e. fire hydrant, Great Marsh, Sailwinds, etc.): BOTTLED
Will a tent be erected? Yes Yes No (Include on plan)
Expected Attendance: 500 Venue Seating Capacity: _____
Is parking available: Yes No For how many vehicles? _____ OFF-STREET
Is staging or platform required? Yes No Amplification? Yes No
List types of musical instruments: KEYBOARD, DRUMS, GUITARS
Are required approvals attached, e.g., State, County: Yes Yes No

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

If yes, indicate closure time (consider set up and breakdown time): 11 AM - 6 PM

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: _____

2 officers
Police Detail Estimated Cost: \$ 360.00 DPW Personnel Estimated Cost: \$ _____

Cambridge Police Department: Approved: Denied: _____ Signature: [Signature]

Rescue Fire Department: Approved: Denied: _____ Signature: [Signature]

Department of Public Works: Approved: Denied: _____ Signature: [Signature]