



APPLICATION FOR A SPECIAL EVENT LICENSE

Date of Application: 6/29/2016

Event Title or Type: 2nd Annual Family Fun Fest.

Location of Event: Area at the corner of Cedar Street and Race Street

Date(s) of Event: Saturday, October 22, 2016

Hours of Event: 8:00am - 3:00pm

Organization/Corp. Name: Dirchester County Department of Social Services

Signature of Holder of Event: N. Bligen

Printed Name: Nichollette Smith-Bligen Title: Director

Address of Holder of Event: 627 Race St., P.O. Box 217, Cambridge, MD 21613

Business Telephone: 410-901-4100 Residence Telephone: N/A

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

Is event to on City, State, or Private Property? City Name of Property Owner: City of Cambridge

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.): Wash stations

Will a tent be erected? Yes No (Include on plan) in the ground/grass

Expected Attendance: 800 Venue Seating Capacity: 1,000

Is parking available: Yes No For how many vehicles? varies

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

List types of musical instruments: DJ

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

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: [Signature]

Rescue Fire Department: Approved: Denied: Signature: _____

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

State of Maryland



Maryland's Human Services Agency

DEPARTMENT OF HUMAN RESOURCES

Dorchester County
Department of Social Services



Nicholette Smith-Bligen, LICSW
Director

627 Race Street
P.O. Box 217
Cambridge, Maryland
21613

Telephone 1410.901.4100
Fax: 1410.901.2705

June 7, 2016

Re: City Owned Property (Corner of Cedar St. and Race St.)

To City Council Members:

The Dorchester County Department of Social Services will be hosting its 2nd Annual Family Fun Fest. On behalf of DCDSS, the planning committee requests the City's consideration to use the area at the corner of Cedar Street and Race Street as the location for the day's activities. This event will be held on Saturday, October 22, 2016.

The purpose of this event is to engaging provide family fun activities for our customers and community residents. This event will be carnival style and open to the public free of charge. We are requesting the use of the property during the hours 8:00am-3:00pm, which includes time allocated to set up and clean up. . In addition, we request the use of the electrical outlets for entertainment and vendors.

Thank you in advance for your consideration. If you have any further questions, please contact Tyra Washington by phone 410-901-4139 or email at Tyra.Washington@Maryland.gov.

Sincerely,

Nicholette Smith-Bligen

Nicholette Smith-Bligen, Director