



APPLICATION FOR A SPECIAL EVENT LICENSE

Agenda Item No. 09
Date 08-22-2016

Date of Application: August 15, 2016

Event Title or Type: Summer Sendoff

Location of Event: Poplar Street and the 400 Block of Race Street

Date(s) of Event: September 10, 2016 Hours of Event: 5-10 p.m.

Organization/Corp. Name: Cambridge Main Street

Signature of Holder of Event: [Handwritten Signature]

Printed Name: Thomas Hutchinson Title: President, Cambridge Main Street

Address of Holder of Event: 505 Poplar Street, Suite 300, Cambridge MD 21613

Business Telephone: 443-257-9074 Residence Telephone: _____

Email Address: president@cambridgemainstreet.com

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

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

Are you requesting the city to provide trash containers? No

Is water available at event? No

If yes, list source of water (i.e. fire hydrant, Great Marsh, Sailwinds, etc.): Hydrant, individual businesses

Will a tent be erected? No (Include on plan) - Small 10x10 tents, not a large tent

Expected Attendance: 500-1000 Venue Seating Capacity: 3000+ (Outdoor event)

Is parking available? No For how many vehicles? 200

Is staging or platform required? Yes Amplification? No

List types of musical instruments: Guitars, drums, microphones

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

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

If yes, indicate closure time (consider set up and breakdown time): 3:00-11:00

Will food be prepared on the premises? No

If yes, is County Health Dept. Inspection Approval attached? Yes Restaurants will provide prior to event.

Will alcohol be served? 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: \$ 630 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]

