



Town of Occoquan SPECIAL EVENT APPLICATION

APPLICANT INFORMATION

NAME:		
ADDRESS:		
CITY:	STATE:	ZIP:
PHONE:	EMAIL:	

EVENT INFORMATION

NAME OF EVENT:		
DATE(S) OF EVENT:		
SET UP TIME:	BREAKDOWN TIME:	DURATION:
LOCATION OF EVENT:		ESTIMATED ATTENDANCE:
EVENT ORGANIZER:		
PHONE:	EMAIL:	
PURPOSE OF EVENT:		RAIN DATE:
SPONSOR(S)		

TYPE OF EVENT ACTIVITY

Will alcoholic beverages be served?	Yes	No	Please describe:
Will food be served?	Yes	No	Please describe:
Will merchandise vendors be invited?	Yes	No	Please describe:
Will there be live music or a DJ?	Yes	No	Please describe:
Will there be performances?	Yes	No	Please describe:
Will there be advertising?	Yes	No	Please describe:
Does event signage meet ARB guidelines?	Yes	No	Please describe:
Will the event require support from Town?	Yes	No	Please describe:
Police?	Yes	No	Please describe:
Maintenance?	Yes	No	Please describe:
Electrical power	Yes	No	Please describe:
Water?	Yes	No	Please describe:
Other	Yes	No	Please describe:

REQUIREMENTS

Park Fees?	Yes	No	Waived by Town Council
Additional insurance required?	Yes	No	

Please attach to this application:

- Conceptual Site Plan (includes points of entry and exit and parking considerations for visitors and exhibitors)
- List of event activities
- Clean Up plan

Alcohol beverages sold or provided must meet the requirements set by the VA Department of ABC.

All vendors providing or selling food or beverages must meet the requirements of the Health Department.

No itinerant vendor shall conduct business within the confines of the special event without submitting itinerant vendor fees to Town Hall before the event.

All vendors selling merchandise or food/beverages are responsible for VA sales tax.

Signature of Applicant: _____ **Date:** _____

Office Use Only	
Date Received: _____	Date Application Complete: _____
Date Approved: _____	Approved By: _____