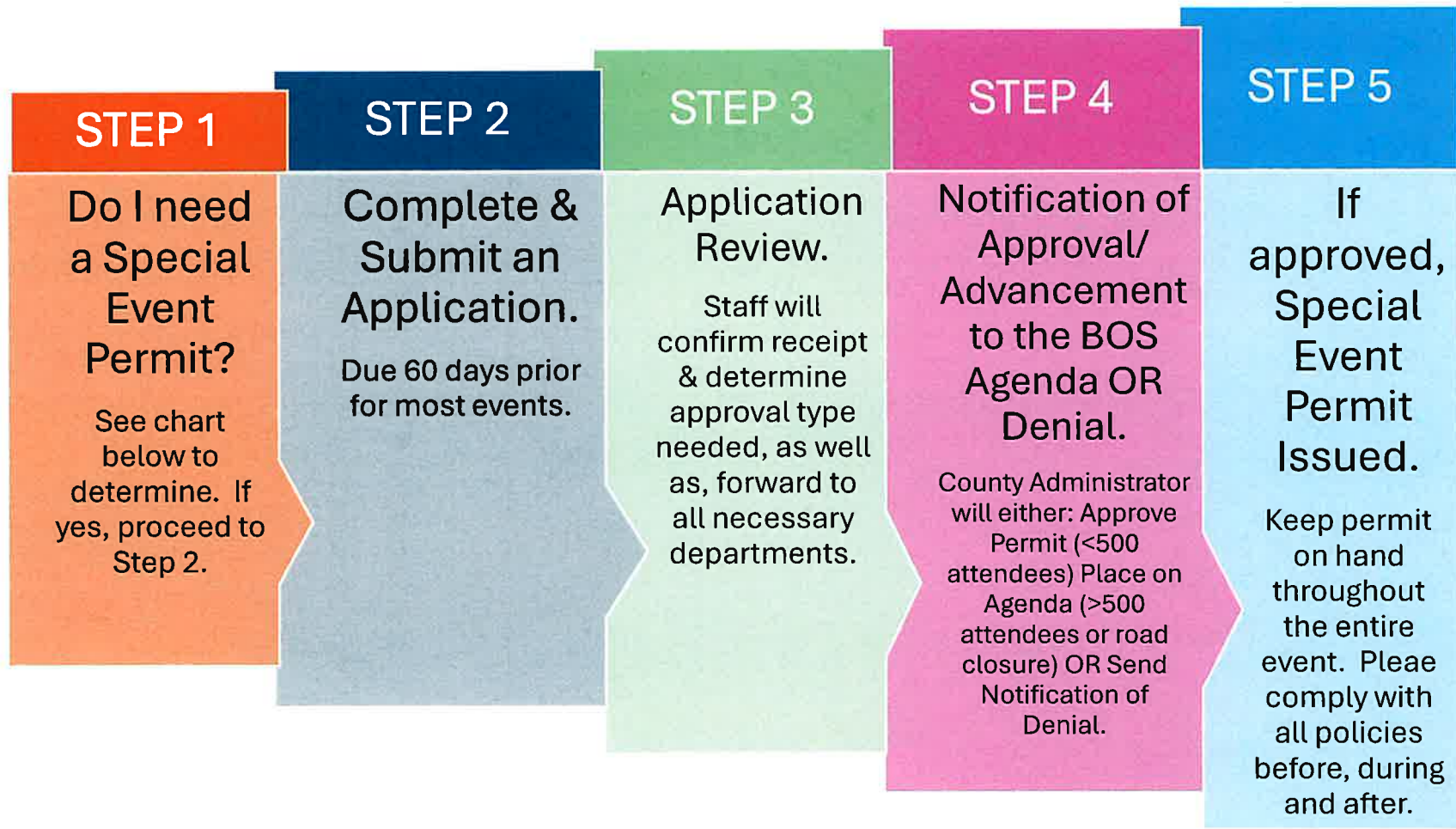


Amelia County Special Event Application Process



Will your event have.....

- Steet Closures
- Amplified Sound
- Food Concessions
- Festival or Carnival Entertainment/Rides
- 100+ Attendees

Refer to Special Events section 138-1

YES

NO

Will the event have 500+ attendees or Road Closure??

Special Event Permit is NOT required.

YES

NO

Event will need Board of Supervisor Approval

Event will need County Administrator Approval





APPLICATION FOR SPECIAL EVENT PERMIT

Date Received: _____

Fee Amount: _____

The application shall be submitted not less than sixty (60) days nor more than twelve (12) months prior to the date of the proposed activity. Any road closures must submit a road closure application to VDOT.

Applicant Name:	Date:
Email:	Phone:

Section 1: Event Information

Name of event: _____ Date/Time: _____

Location of event: _____

Description of the proposed activity: _____

Anticipated # of attendees per day: _____ Will alcohol be served or permitted at this event? _____

****Note:** Sheriff's Office must review the event permit application and determine if off-duty coverage is needed based on the event application details. The applicant must make an appointment with the Sheriff's Office administration to review the details of off-duty coverage prior to event permit approval."

Date of Appointment: _____ Sheriff's Office Representative Signature _____

Provisions for sanitation facilities, crowd, noise and traffic control, parking and loudspeaker placement:

Food and beverages to be sold or distributed: _____

****Note:** The applicant is responsible for securing all permits as required by the Virginia Department of Health and/or Virginia Alcoholic Beverage Control Authority prior to the event.

Proposed equipment, vehicles, staging, bleachers, shelters and electricity requirements: _____

Fees:

_____ Single Day Event - \$25.00
_____ 2 Day Event - \$50.00
_____ 3+ day event/Season Permit - \$100.00

This Application made this _____ day of _____, 20____.

Applicant Name: _____
(Print Name)

Mailing Address: _____

Telephone: _____

Signature: _____

Individual(s) who will be responsible for ensuring compliance with the conditions of this permit and the Amelia County Special Event Ordinance:

Printed Name

Phone Number

APPROVALS

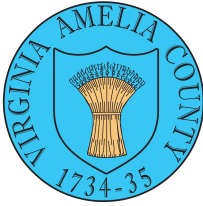
County Administrator

Public Works

Sheriff's Department

Emergency Management

Community Development



RIGHT OF ENTRY

I/We _____
Applicant or Property Owner (Circle One)

hereby grant the Board of Supervisors, its lawful agents, or duly constituted law enforcement officers to go upon the property at any time for the purposes of determining compliance with the provisions of the **AMELIA COUNTY SPECIAL EVENT ORDINANCE**.

The Board of Supervisors shall have the right to revoke any permit issued under the Ordinance upon noncompliance with any of its provisions and conditions, as understood by the Applicant of the Application.

Date

Signature

Print Name

Address