

# MOUNT JOY TOWNSHIP SPECIAL EVENTS PERMIT APPLICATION

Permit #: \_\_\_\_\_

In accordance with §110-90 Special Events  
(Application must be submitted 75 days before event)

**Person(s) sponsoring and producing the Event [If more than one please attach]**

Name: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_  
 Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

**Legal Title Owner of Land where Event and any auxiliary function are to be held [If more than one please attach]**

Name: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_  
 Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
 Adams County Tax Map Identification Number: \_\_\_\_\_

**Number of People Attending: \_\_\_\_\_ Date(s) of the Event: \_\_\_\_\_**

**A copy of the following needs to be attached to this application:**

- \_\_\_ Site map showing all public roads in a one mile radius of the site(s)
- \_\_\_ Narrative statement of all activities, including a schedule of events as they occur
- \_\_\_ Statement for supporting the number of participants
- \_\_\_ Statement showing how the sanitation, refuse collection & removal, toilet facilities, traffic control, parking allocation & control, medical services, emergency services, crowd control, safety & security, water supply and transportation will be met
- \_\_\_ List of proposed providers and proof that they will be able to deliver the service for the above mentioned
- \_\_\_ List of any and all permits required by any government or regulatory entity and the expected Date: \_\_\_\_\_ when the permits will be obtained and a copy submitted to be attached to this application
- \_\_\_ Proof of Insurance naming the Township as a covered insured in the amount of no less than \$10,000,000
- \_\_\_ Statement of Liability, as approved by the Township Solicitor, to pay for any and all damages to third persons or property resulting from the event above and beyond what is covered by the liability insurance
- \_\_\_ Financial statement showing sufficient assets to support the above statement
- \_\_\_ Proof that a copy of the completed application along with any maps or site plans in accordance with §110-90 D (2) & D (4) of this section has been delivered to each and every property owner abutting the site for the event and auxiliary functions

**Supplemental or Additional Information:** The Zoning Officer and the Board of Supervisors may request additional information they deem warranted by the nature of the event. This information needs to be submitted prior to the Township making its decision on the application.

Application is hereby made for a permit to hold a specialized event in the Township of Mount Joy. Applicant agrees that such event will be held in accordance with the plans and specifications submitted and that it will comply with all provisions of the Zoning Ordinance and all applicable ordinances of Mount Joy Township as well as any County, State, or Federal regulations.

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

<b>Date Accepted:</b>	<b>Accepted By:</b>	<b>Fee:</b>	<b>Check #:</b>
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