All special events regardless of type will require the submission of a Special Event Master Application and comprehensive site plan.

As you begin filling out the application, you will see prompts for additional documentation that may be required depending upon your event elements. Each form is referenced by number and name and can be located in the [**Special Event Document Center**](https://www.glendaleaz.com/cms/One.aspx?portalId=15209085&pageId=15740791)**.**

Liquor License Questions – P: 623-930-2209 or 623.930.2220 E: [liquorlicense@glendaleaz.com](mailto:liquorlicense@glendaleaz.com)

All Other Questions – P: 623.930.2029 E: [dwilliamson@glendaleaz.com](mailto:dwilliamson@glendaleaz.com)

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| --- | --- |
| EVENT BASICS | |
| Title: |  |
| Event Location: |  |
| Property Type: | City Park/Facility  Provide Park/Facility Name: |
|  | Other Public Property (may require certificate of insurance & user agreement) |
|  | Private Property Owned |
|  | Private Property Leased (include authorization documentation) |
| Are tickets being sold for this event? | No  Yes |
| Is this event open to the public? | No  Yes |
| Estimated Attendance: |  |
| Event Description:  (please be detailed) |  |

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| EVENT DATES | |
| Set-up Begins: | Date       Time |
| Event Dates/Times: | All Dates       Hours of Operations From       To |
| Tear-Down Complete: | Date       Time |

|  |  |
| --- | --- |
| EVENT ORGANIZER/CONTACT | |
| Name/Point of Contact: |  |
| Company/Organization: |  |
| Phone: | Primary:       Secondary: |
| Email: |  |
| Mailing Address: |  |
| License Numbers: | Glendale Business License:  Transaction Privilege Tax License: |
| Property Owner (if different than above): | Name:       Phone:       Email: |

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| SPECIAL CIRCUMSTANCES: | |
| If any of the following types of activity will be a part of this event, additional forms are required. Please refer to the [Special Event Document Center](https://glendaleaz.com/cms/One.aspx?portalId=15209085&pageId=15740791&action=design) for current forms and instructions. | |
| Will alcohol be served? | No  Yes, Beer Permit City Parks Only (Must Apply in Person)  Yes, Include Form 2. Temporary Extension of Premise  Yes, Include Form 3. Special Event Liquor License  Applicant: |
| Will there be fireworks, pyrotechnics, flame effects, or CO2? | No  Yes, Include Form 4. Pyrotechnics Permit Application  Vendor/Provider Name: |
| Will your event impact public streets or sidewalks? | No  Yes, Traffic Control Plan submitted (Link 5 in Document Center)  Yes, Traffic Control Plan is pending completion  Do not use this form for Neighborhood Block Parties, **see Link 6** |
| Are you using any vendors or contractors? | This applies to any equipment vendors or sale of good/services  No  Yes |
| Are you a downtown business? | No  Yes, setting up a 3’ x 6’ table within the store front – not restricting sidewalks and allows for ADA access. |
| Please describe your sanitation plan. (For public property only) |  |

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| EVENT TYPE | |
| Festival/Concert  Parade  Race  Expo/Trade Show | Cultural/Sporting Event  Seasonal Sale (tree lot, fireworks lot, merchandise sale)  Other: (describe) |

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| EVENT ACTIVITIES |
| Amplified Sound (Band, Dj, Music, Announcers)  Amusement Rides (Mechanical Or Inflatable)  Food Trucks Or Mobile Cooking Apparatus  Animal Exhibits Or Animal Rides  Vehicle Display  Other: (Describe) |

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| ELECTRICITY, STRUCTURES, AND RESTROOMS | |
| For additional details on the requirements related to the following items, see the SPECIAL EVENTS PLANNING GUIDE | |
| How will you supply electricity? | Generators are the most common form of power used for events. Location of generators must be shown on your site plan, include size and quantity below. Generators 20KW/26HP or greater must be installed by a licensed professional.  Size in KW or HP:       Quantity:  Size in KW or HP:       Quantity:  Size in KW or HP:       Quantity:  Size in KW or HP:       Quantity:  Licensed Installer (if 20KW/26HP or more):  Other Electricity: (Describe) |
| Will the event use a stage or platform? | Dimensions: (Quantity, Length, Width, Height)  Installer: (Company Name, Contact Name, Phone)  None |
| Will the event use pop-up tents, canopies, or temporary structures? | Dimensions: (Quantity, Length, Width, Height)  Installer: (Company Name, Contact Name, Phone)  Manufacturer:  Model Number/Name:       Quantity:  None |
| How many restrooms will be available to attendees? | (Quantity) Existing/Fixed Facilities  (Quantity) Portable/Temporary Facilities  Installer: (Company Name, Contact Name, Phone) |

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| SECURITY AND FIRST AID/MEDICAL PLAN REQUIREMENTS |
| Describe security provisions including number and qualifications of staff that will be on site: |
| Describe first aid and emergency medical service provisions, including number and qualifications of staff and level of care (e.g. first aid, basic life support, or advanced life support) that will be available on site: |