



Town of Jonesborough, Tennessee

Special Event Permit Application

A *Special Event* is any occasion including but not limited to fairs, shows, exhibitions, city-wide celebrations and festivals taking place within a specifically defined area of the Town of Jonesborough for a period of time. A special event may include the use of public facilities in the Town of Jonesborough, including, but not limited to parks, streets, alleys, sidewalks, restrooms or other municipal owned facilities, and which includes a general invitation to all members of the public to either participate in and/or view such event, or part thereof, Special Events may be one-time or recurring occasions.

12-402 Jonesborough Municipal Code

Whenever any person, group, association, club, business, firm or corporation desires to sponsor a Special Event such person, group, association, club, business, firm or corporation shall first obtain a "Special Event Permit" from the Town of Jonesborough. *12-403 Jonesborough Municipal Code*

Person(s) Completing Application:

Name: _____ Date: _____

Address: _____

Phone: _____ Email: _____

Applicant Beware: Unfortunately, many of our applicants have received emailed invoices for their event applications. **THESE ARE SCAMS! DO NOT PAY!** If you receive an invoice for your event, please **DO NOT PAY**. If you have questions about the legitimacy of the invoice call Town Hall at 423-753-1030. **WE WILL NOT EMAIL YOU AN INVOICE.**

Completion Instructions:

1. Each question on this must be answered in some fashion for your application to be considered for approval. Please attach additional sheet(s) if necessary to completely and accurately provide the requested information in each question, labeling any additional sheet(s) clearly as such.
2. **Incomplete applications will not be accepted or considered.**
3. The application and your exhibits of the entire package should be filed with the Town Administrator's office at least 90 days in advance of your event for consideration/approval from

the BMA. See Schedule of Approval, Chapter 4, Title 12-406(2) of the Jonesborough Municipal Code.

Sponsoring Organization Information:

Name: _____

Purpose: _____

Is this a recurring Special Event? _____ Yes _____ No

Special Events that are recurring require the annual approval of the Board of Mayor and Aldermen. This permit application shall provide a schedule for the term of a recurring event: _____

Event Information:

Name of Event: _____

Description & Purpose of Event: _____

Dates & Hours of Event: _____ Estimated Number Expected to Attend: _____

Estimated Number of Town Citizens Expected to Participate in and/or View Event: _____

Is a request for public safety assistance included in your Security Plan attached as per the list of items below? _____ Yes _____ No

Required Exhibits to Application

Please attach the following exhibits to this application (each item should be clearly labeled with the number in this list to facilitate a prompt review of your application). If your event will not involve one or more of these items, you should attach an exhibit with appropriate number and heading explaining that fact:

1. **Hold Harmless Agreement** executed on form approved by the Town of Jonesborough (included in this application packet). *Must be notarized, these services are available at Town Hall if necessary.*
2. **Li of Pre-Events and Post-Events** to be held in conjunction with the main event (including parade, fireworks, etc.)
3. **Map with City Streets** showing event boundary and registration area, tents, booths, food, office/administration, etc.
4. **Outline of Your Publicity Plan** with examples of previous efforts, if available.
5. **Security Plan** including crowd control, pedestrian safety, any special parking provisions including handicap spaces, vendor and/or performer parking, a parking map and list (include samples of any special parking permits to be used, if any), and any request for public safety assistance (a request for public safety assistance should also be included with your Town Services Request in the next section of this application).
6. **Emergency Plan** including emergency procedures, provisions for first aid services and provisions for appropriate emergency communication. Include an outline of any activities involving moving vehicles and safety procedures used to avoid or prevent injury.
7. **Event Sponsors List** including all sponsors' names, addresses, and telephone numbers along with their title and area of responsibility for the event.
8. **Proof of your liability Insurance** provided by your insurance company (see example included in application packet).
9. **Anticipated Vendors and Concession Booth List** (a final and complete list of vendors and concession booths shall be filed with the Town Recorder at least 48 hours prior to the event.
10. **A list of Physical Services for the Event that will be Provided by or Contracted for by the Event Sponsor.** List should include erection of temporary stages or facilities including tents, lighting, sound, efforts to address refuse collection, security, etc.

11. **Clean-Up Plan** detailing person(s) responsible for site clean-up, schedule and any repairs or grounds remediation that is expected.

12. **Street Closure Request** listing of all streets/portions of streets including the dates and hours of closure (failure to list a portion of a street will result in your application being considered under the assumption you are requesting the entire street to be closed within the town limits).

Request for Services from the Town of Jonesborough

Please indicate any services you request for your event from the Town of Jonesborough*. (A fee may be levied by the Town for additional services per the Municipal Code, see 12-407)

_____ Police & Security	_____ Refuse Collection
_____ Street Cleaning	_____ Event Preparation/Beautification
_____ Signage	_____ Parking
_____ Communication and/or Publicity	
_____ Use of Facilities	What Facilities: _____
	Dates/Hours: _____
	Space/Staffing Needs: _____

**For each such service requested please provide a detailed description of your request as Exhibit 13*

Acknowledgement of Receipt of Chapter 4 of the Jonesborough Municipal Code

I/We the undersigned representatives of the sponsoring organization listed above acknowledge receipt of a copy of Chapter 4 of the Jonesborough Municipal Code governing special events and agree to comply with all provisions of that Chapter.

Signature: _____ Date: _____

Printed Name: _____ Title: _____

Witness: _____

Applicant Acknowledgement: Unfortunately, many of our applicants have received emailed invoices for their event applications. **THESE ARE SCAMS! DO NOT PAY!** If you receive an invoice for your event, please DO NOT PAY. If you have questions about the legitimacy of the invoice call Town Hall at 423-753-1030. **WE WILL NOT EMAIL YOU AN INVOICE.**

Signature: _____ Date: _____

The undersigned certifies that the information contained in both this application and the attached exhibits is complete and accurate and further agrees to amend this application immediately if any such information changes. The undersigned understands the Board of Mayor and Aldermen may approve, reject or modify this request in whole or in part under the Jonesborough Municipal Code.

Signature: _____ Date: _____

Printed Name: _____ Title: _____

Witness: _____



Town of Jonesborough, Tennessee Special Event Permit Application

EXHIBIT 1 – Hold Harmless and Indemnity Agreement

This agreement made on the ____ day of _____, 20____, in the Town of Jonesborough, County of Washington, State of Tennessee.

The parties to the agreement are the undersigned _____,
(Name of Organization or Sponsor)

Called “indemnitor”, and the Town of Jonesborough, Tennessee called “indemnatee.”

Indemnitor has submitted a Special Event Permit Application to indemnatee. The agreement attached as Exhibit 1 to that application. Approval of that application is expressly conditioned on the execution of this agreement, indemnatee has agreed to review for approval the application for a special event and if approved to allow the indemnitor’s special event to take place within the limits of the Town of Jonesborough in consideration of the indemnatee’s allowing the event to take place and \$1.00, receipt of which by indemnitor is acknowledged, the parties agree as follows:

SECTION 1

Scope of Indemnity

Indemnitor undertakes to indemnify and to save harmless indemnatee from any liability, loss or damages indemnatee may suffer as a result of claims, demands, costs, or judgments against it arising out of the operation within the limits of the Town of Jonesborough, County of Washington, State of Tennessee, of the special event outlined in the application or the management thereof.

Indemnitor assumes full responsibility for all damages and injury that may result to any person or persons or to adjoining property by reason of the excavation for, and the erection, construction, and maintenance of, any structures put in place for the event and agrees and covenants to indemnify indemnatee against any such claim(s).

Indemnitor expressly undertakes to indemnify and to save harmless indemnatee from all liability and/or loss or damages for or arising out of the special event outlined in the application, whether it be caused by the negligence of indemnatee, indemnatee’s agents or employees, indemnatee’s contractors or otherwise.

SECTION 2
Period Covered

The indemnity will extend from the date of this agreement to and including the date the special event concludes, including cleanup.

SECTION 3
Expenses, Attorney's Fees, and Costs

Should it become necessary for the purposes of resisting, adjusting, or compromising any claim(s) or demand(s) arising out of the subject matter with respect to which indemnification is provided by this agreement, or for purposes of enforcing this agreement, for indemnitee to incur any expenses, or become obligated to pay any attorney's fees or court costs, or costs within a reasonable time, in no event to exceed thirty days, after receiving written notice from indemnitee of the incurring of such expenses, attorney's fees or costs.

SECTION 4
Interest

Indemnitor agrees to pay indemnitee interest at the rate of ten (10) percent per annum or any necessary expenses or costs incurred by indemnitee in the enforcement of this indemnity contract, or on any sums indemnitee is obligated to pay with respect to the matters to which indemnity is given in the contract, from the date such expenses or costs are incurred, or such sums are paid.

SECTION 5
Notice of Claim Against Indemnitee

Indemnitee agrees to give indemnitor ten (10) days written notice of any claim made against indemnitee on the obligations indemnified against.

Executed on the date first written above:

Organization: _____ By: _____

Printed Name: _____ Title: _____

STATE OF TENNESSEE
COUNTY OF WASHINGTON

Before me, the undersigned Notary Public in and for the State and County aforesaid, personally appeared _____, with whom I am personally acquainted (or proved to me on the basis of satisfactory evidence), and who upon oath, acknowledged himself/herself to be the _____(title) of _____(organization), and that he/she, as such officer, being authorized so to do, executed the foregoing instrument for the purposes therein contained by signing the name of organization by himself/herself as such officer.

WITNESS my hand and seal at office in the State and County aforesaid, this, the _____ of _____, 20____.

NOTARY PUBLIC

My Commission Expires:

EXAMPLE – EXHIBIT 8

The certificate of Liability Insurance MUST include the ***“The Town of Jonesborough is an Additional Insured on this Policy.”***

SAMPLE OF INSURANCE REQUIRED



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

PRODUCER	THIS CERTIFICATION IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.	
	INSURERS AFFORDING COVERAGE	NAIC #
INSURED	INSURER A:	
	INSURER B:	
	INSURER C:	
	INSURER D:	
	INSURER E:	

COVERAGES

THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. AGGREGATE LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR ADD'L LTR INSRD	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS								
	GENERAL LIABILITY <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC				EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 300,000 MED EXP (Any one person) \$ 10,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 1,000,000 PRODUCTS - COM/PO/ AGG \$ 1,000,000								
	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> NON-OWNED AUTOS				COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$								
	GARAGE LIABILITY <input type="checkbox"/> ANY AUTO				AUTO ONLY - EA ACCIDENT \$ OTHER THAN AUTO ONLY: EA ACC \$ AGG \$								
	EXCESS/UMBRELLA LIABILITY <input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE <input type="checkbox"/> DEDUCTIBLE RETENTION \$				EACH OCCURRENCE \$ AGGREGATE \$ \$ \$								
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? If yes, describe under SPECIAL PROVISIONS below OTHER				<table border="1"> <tr> <td>WC STATU-TORY LIMITS</td> <td>OTH-ER</td> </tr> <tr> <td>E.L. EACH ACCIDENT</td> <td>\$</td> </tr> <tr> <td>E.L. DISEASE - EA EMPLOYEE</td> <td>\$</td> </tr> <tr> <td>E.L. DISEASE - POLICY LIMIT</td> <td>\$</td> </tr> </table>	WC STATU-TORY LIMITS	OTH-ER	E.L. EACH ACCIDENT	\$	E.L. DISEASE - EA EMPLOYEE	\$	E.L. DISEASE - POLICY LIMIT	\$
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E.L. EACH ACCIDENT	\$												
E.L. DISEASE - EA EMPLOYEE	\$												
E.L. DISEASE - POLICY LIMIT	\$												

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES / EXCLUSIONS ADDED BY ENDORSEMENT / SPECIAL PROVISIONS

The Town of Jonesborough is an Additional Insured on this Policy

CERTIFICATE HOLDER Town of Jonesborough 123 Boone Street Jonesborough, TN 37659	CANCELLATION SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING INSURER WILL ENDEAVOR TO MAIL _____ DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO DO SO SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE INSURER, ITS AGENTS OR REPRESENTATIVES. AUTHORIZED REPRESENTATIVE
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