

Special Event Permit Application



Town of Macedon Building & Zoning Department
32 Main Street
Macedon, NY 14502
www.macedontown.net

(315) 986-5932 x-115

DATE SUBMITTED:

(may be scanned and emailed to: buildingclerk@macedontown.net)

A \$20 processing fee is due upon submission of this application to the Macedon Building and Zoning Office. All fees are non refundable and an application shall be submitted a minimum of 15 days prior to the proposed event.

Completed Applications should be submitted with all required documents to the Macedon Building and Zoning Office and shall include a letter of intent describing the event and a scalable site plan showing all proposed structures, parking, facilities, fences, stages, and other applicable information requested by the Town of Macedon. Application shall note security arrangements, waste disposal/clean up procedures, and a list of town facilities to be used/impacted. A map of all proposed routes, signage, and facilities shall be provided. Please review the Town Law to ensure you have provided all accompanying documentation required.

*****If you feel some requirements for submission are not necessary or applicable for your event, you may review this with the Building and Zoning Department prior to submittal.*****

Town of Macedon Special Event Code: <https://ecode360.com/MA1436/laws/LF2258411.pdf>

EVENT SPONSOR / APPLICANT

NAME: _____
CONTACT PERSON: _____
ADDRESS: _____
TOWN/STATE/ZIP: _____
EMAIL: _____
PHONE: (work) _____ (cell/home) _____

If the Sponsor/Applicant is a corporation or does not have residence in Wayne County, they must provide additional information as described in the Town Law.

PROPERTY OWNER (If SPONSOR/APPLICANT is not property owner)

NAME: _____
CONTACT PERSON: _____
ADDRESS: _____
TOWN/STATE/ZIP: _____
EMAIL: _____
PHONE: (work) _____ (cell/home) _____

EVENT INFORMATION

NAME OF EVENT: _____
DATE(S): _____
LOCATION: _____
TAX PARCEL(S): _____
EVENT TIME: (start) _____ (end) _____

Times shall include setup, operation, and clean up.

TYPE OF EVENT:

Block party _____

Bike: _____

Festival: _____

Race/Walk: _____

Parade: _____

Sports: _____

Fireworks Sales: _____

Open House: _____

Other: _____

Provide description: _____

EVENT DETAILS:

Number of staff/employees to be dedicated to event #

Will food trucks be used?

Yes	No
-----	----

How many food trucks?

#

Will alcoholic beverages be served?

Yes	No
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Will alcoholic beverages be sold?

Yes	No
-----	----

If alcohol will be sold has the appropriate license been obtained from the NYS Liquor Authority?

Yes	No
-----	----

Will temporary tents be installed?

Yes	No
-----	----

Will open flame cooking occur?

Yes	No
-----	----

Will there be Fireworks or pyrotechnics?

Yes	No
-----	----

Estimated attendance?

#

Estimated Number of Vehicles?

#

Admission to be charged?

Yes	No
-----	----

How much?

\$	
----	--

Private on-site security?

Yes	No
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Private on-site EMS/Medical?

Yes	No
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The Sponsor/Applicant hereby deposes that they are the named sponsor of the Special Event and that all statements in said application are true.

Signature of Event Sponsor_____
Printed Name_____
Signature of Property Owner (if different than Sponsor)_____
Printed Name*(documented authorization of property owner acceptable in lieu of signature on this document)***APPROVALS:**

Code Enforcement Approval: _____ Date: _____

Macedon Police Approval : _____ Date: _____

Fire Marshal Approval : _____ Date: _____

CONDITIONS OF APPROVAL (list below):
