

The Town of Eden now requires an Event Permit Application to be filled out for any event that has a significant impact on our community. This is any event that uses community resources such as Police, Fire, Eden Emergency Squad and/or Highway Department.

Applications must be submitted at least 30 days prior to your event.

Completed applications along with required Certificate of Insurance can be mailed or faxed to:

Town of Eden
Supervisor's Office
2795 East Church Street
Eden NY 14057

Fax: 716-992-4131

The Town Clerk's Office will contact you when the permit has been approved and advise if \$50.00 permit fee is owed. No Permit will be released if payment is outstanding.

Town of Eden

2795 East Church St.
Eden, NY 14057
(716) 992-3408

SPECIAL EVENT PERMIT APPLICATION



Date of Application: _____ Please complete this form and return to the Supervisor's office

Organization: _____ Address: _____

Contact Name: _____ Phone # _____ Email: _____

Name/Type of Event: _____

Date of Special Event: _____ Location: _____

Event Time: _____ Anticipated Peak Attendance: _____

Will the following be at your Event? (check all that apply)

Food _____ Alcohol _____ Tents _____ Number of Tents and sizes _____

Will cooking be done under a tent? _____ Fireworks _____ Hazardous Materials _____

Music _____ Live _____ Recorded _____ PA System _____

Will streets be closed for this Event? _____ Name of Street(s) _____

Special Parking Accommodations? _____ Additional Security? _____

REQUIRED Certificate of Insurance:

A Certificate of Insurance naming the Town of Eden as an additional insured is required in the event the applicant and or the intended users shall place a tent or other structure upon Town owned property and the general liability shall be in the amount of at least \$1,000,000.

REVIEWED BY:(Please Initial)

Town Supervisor: _____ EMS: _____ Emergency Manager: _____

Fire Chief: _____ Highway: _____ Police: _____ Rec Director: _____

APPROVED BY:

Building Inspector: _____ Date: _____

PERMIT FEE: \$50.00

Paid Cash/Check _____ Waived _____ Initials _____