



## Application for a Festival or Event Permit

Event Name and Description: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

### Applicant Information

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_ Phone: \_\_\_\_\_

E-mail Address: \_\_\_\_\_

### Organization Information

Organization Name: \_\_\_\_\_

Address: \_\_\_\_\_

Authorized Head of Organization: \_\_\_\_\_

Phone: \_\_\_\_\_ E-mail Address: \_\_\_\_\_

### Event Chairperson/Contact

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_ Phone: \_\_\_\_\_

E-mail Address: \_\_\_\_\_

### Event Information

Event Location/Address: \_\_\_\_\_

Purpose: \_\_\_\_\_

Event Start Date and Time: \_\_\_\_\_

Event End Date and Time: \_\_\_\_\_

Approximate Number of Persons Attending Event Per Day: \_\_\_\_\_

Site Preparation and Set-Up Date and Time: \_\_\_\_\_

Clean-Up Completion Date and Time: \_\_\_\_\_

**List all activities that will be conducted as a part of this event including street closures, traffic control, vendor booths, etc. Include any requests for city services.**

---

---

---

---

---

---

Will food and/or beverages be available and/or sold? **YES/NO**

\*Will alcohol be available and/or sold? **YES/NO**

**If yes, will the event be in the Historic Overlay District? YES/NO**

If food will be prepared on-site, a Temporary Food Permit must be obtained by the Environmental Health Department.

Will dumpsters be needed? \_\_\_\_\_

Will an Unmanned Aircraft Systems Unit (drone) be used? **YES/NO** If so, provide a copy of the current FAA License.

***Please submit a site plan showing the layout of the event including equipment, stages, and street locations.***

**I, THE UNDERSIGNED APPLICANT, AGREE TO INDEMNIFY AND HOLD HARMLESS THE CITY OF WAXAHACHIE, ITS OFFICERS, EMPLOYEES, AGENTS, AND REPRESENTATIVES AGAINST ALL CLAIMS OF LIABILITY AND CAUSES OF ACTION RESULTING FROM INJURY OR DAMAGE TO PERSONS OR PROPERTY ARISING OUT OF THE SPECIAL EVENT. DUE TO COVID-19, I ALSO UNDERSTAND APPROVAL OF MY EVENT IS SUBJECT TO THE THEN CURRENT NECESSARY PRECAUTIONS RESULTING FROM COVID CASE TRENDS AS WELL AS ANY CHANGE IN ACCORDANCE WITH FEDERAL, STATE, OR LOCAL ORDERS.**

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

**\* Please note that approval of this permit does not replace/modify compliance with all applicable state laws as specified by the Texas Alcoholic Beverage Commission (TABC).**