



# Administrative Special Event Permit

**Event Name**

**Event Date(s)**

**Time of Event**

**Location of Event**

*(facility name/address):*

<b>Event Coordinator Information</b>	<i>Name</i>
	<i>Address</i>
	<i>Phone/Cell</i>

<b>Will food be served on-site?</b> If yes, please check with the Health Department for food service regulations.	Yes	No
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<b>Will children's inflatable bounce units be provided on-site?</b> If yes, please check with the Zoning Office for regulations.	Yes	No
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Please briefly describe the activities planned for this event (for review by Town staff).

**Anticipated Attendance**

*Please carefully read the liability information provided on the back this form prior to submittal.*

**Scheduled Rain Date**

**Town of Altavista**  
**510 7th Street**  
**P.O. Box 420**  
**Altavista, VA 24517**  
[www.altavistava.gov](http://www.altavistava.gov)  
[townhall@altavistava.gov](mailto:townhall@altavistava.gov)

**Indemnity Agreement**

In consideration for the Town of Altavista granting the undersigned Event Organizer representative permission to hold the proposed event and to display, sell, or offer for sale wares, services and/or food or merchandise within the perimeters of their event venue, the undersigned agrees to assume the defense and indemnify and save harmless the Town, its employees, offices and agents against any and all claims, liabilities, judgments, costs, causes of action, damages, expenses and shall pay all attorney’s fees, court costs and other costs incurred in defending such claims, which may accrue against, be charged to, be recovered from, or sought to be removed from the Town, its employees, officers and agents by reason of or on account of any personal injury or death or damage to property arising from the undersigned’s event and associated activities, if such personal injury or death or damage of property is caused by the acts or omissions or negligence of the undersigned, or the undersigned’s employees and agents or by such acts, omissions or negligence of any other person subject to the undersigned’s control. The Town, its employees, officers and agents shall not have to give the undersigned any specific types of notices of such claims.

**Affidavit of Applicant**

I certify that the information contained in this Special Event Application is true and correct to the best of my knowledge and belief, that I understand, and agree to abide by all regulations, provisions, and rules governing Special Events as set forth by the Town of Altavista. I certify that I understand that this application is made subject to the rules and regulations established by the Altavista Town Council. I agree to abide by these rules and further certify that, on behalf of the organization, I am authorized to commit that organization, and therefore agree to be financially responsible for any costs and fees that may be incurred by or on behalf of the Event to the Town of Altavista. I grant permission for Town officials to access the property at any time to enforce permit compliance.

A signed hard copy of the Indemnity Agreement and Affidavit of Applicant portions of the Special Event Permit must be provided to the Town before an application will be considered fully executed. Submit one copy of this Special Event permit application to Town Hall, ATTN: Special Event, 510 7th Street, Altavista, VA 24517.

Event Coordinator/Responsible Event Representative  
(Print Name)

Date

Signature

*FOR OFFICE USE ONLY:*

Town of Altavista Representative (Print Name)

Date

Signature