

Contact Information

Name of Organization	Address of Organization
Designated Contact	Mailing Address
Phone	Email
Event Information	
Name of Event	Location of Event

Date of Event	Time of Event	Include set up clean up time
Type of Event	Approx. # of Attendees	

Detailed Description Provide details about the event and list road closure or special requests

FOR OFFICIAL USE

Community Development Director	Chief of Police	Public Works Director
City Clerk	City Council Resolution # and Da	te
Number of Officers Required	SAVE Affidavit Received	Fee Waiver Approval



Temporary Events Policy

- 1. All events applications must be submitted sixty(60) days prior to the event. Submit application to Community Development Department: **4181 Atlanta Street. Email: commdev@cityofpowdersprings.org. Phone: 770.943.1666**
- 2. Site Plan, Maps, Sign samples and dimensions, or other applicable visual exhibits are required with your permit application. Staff may request additional information where applicable.
- 3. There is a \$55.00 Event Permitting Fee payable at application submittal.
- 4. If required, there is a \$60.00 per off-duty officer/per hour charge for events (2 hour minimum) for road closures or traffic control. The need for and number of Officers will be determined by the Chief of Police.
- 5. All requests for street closures or use of public property must be approved by City Council. Requires additional time.
- 6. Upon approval, the Applicant must make the arrangements for officers and their fees with the Chief of Police.
- 7. Where applicable, the event Applicant is responsible for:
 - I. Set up and clean up of the event including trash pick up in all event areas.
 - II. Portable toilet rentals.
 - III. All event organization, supplies, registration, management, timing, and staging .
 - IV. Acquiring permits with County Health department for ANY food vendors participating in the event. Visit: CobbandDouglasPublicHealth.com for more information.

Signature of Applicant and Release

Organizer agrees to abide by the above policy. City of Powder Springs is not responsible for any damages or loss. Organizer hereby indemnifies and agrees to hold harmless the event officers, committee members, staff and agents, the City of Powder Springs, Cobb County, and the State of Georgia, against all claims, liabilities, damages and expenses (including the expense of litigation and attorney's fees) asserted against or incurred by them arising in whole or in part out of Organizer's activities hereunder. Organizer agrees that City of Powder Springs may rescind this agreement and revoke immediately all of the rights of the Organizer, his/her agents or his/her employees to exhibit space at the event for violation of the policy or any ordinance of the City of Powder Springs or any law of the State of Georgia. Organizer represents that all information provided in the application is true and correct. By signing below, Organizer represents that he/she has read and understood all policies.

Signature

Printed Name and Title



Temporary Events SAVE Affidavit. Required for road closures and use of public property requests.

Affidavit Verifying Status of Applicant Pursuant to O.C.G.A 50-36-1.

Effective July 1, 2007, every agency providing public benefits through any local program is responsible for determining the immigration status of citizen applicants. By executing this affidavit under oath, as an applicant for a City of Powder Springs Event Permit benefit as referenced in O.C.G.A. Section 50-36-1, I am stating the following with respect to my application for a license or permit or benefit:

- □ I am a United States citizen 18 years of age or older; OR
- □ I am a legal permanent resident of the United States 18 years of age or older; or I am an otherwise qualified alien or non-immigrant under the Federal Immigration and Nationality Act 18 years of age or older and lawfully present in the United States. AND
- I provided at least one secure and verifiable document, required by O.C.G.A 50-36-1(e)(1) with this affidavit. O.C.G.A. Section 50-36-1(e)(2) requires that aliens and legal permanent residents provide their alien registration number. My alien number issued by the U.S. Department of Homeland Security or other federal immigration agency: ______. The secure and verifiable document provided: ______.

In making the above representation under oath, I understand that any person who knowingly and willfully makes a false
representation in an affidavit shall be guilty of a violation of Code Section 16-10-20 of the Official Code of Georgia

Signature of Applicant	Printed Name	Date	NOTARY STAMP
Subscribed and sworn before me this	day of 20		
Signature of Notary Public	Name of Notary Public	My Commission Expires	