

## **Upper Dublin Township Police Department**

520 Virginia Drive Fort Washington, Pennsylvania 19034 Voice: 215-646-2101 Fax: 215-628-8976 www.UpperDublin.net



## **Upper Dublin Township – Large Event Application ORDINANCE 977**

\*Upon completion of this application a copy needs to be mailed, hand-delivered, or emailed to the Deputy Chief of Police @ daniel.wade@udpd.us\*

Day & Date of Event:	Incident	#:		
Applicant's name:		Title:		
Address:				
Telephone:	Email:			
Alternate contact:		Title:		
Address:		Title.		
	Email:			
Sponsors name (if other than the applicant):				
Address:				
	Email:			
Name of the Person In-Charge (at the location on the day of the event):				
Address:				
Telephone:	Email:			
Nature or Purpose of the Event:				
Start Time of the Event:	End Time of the Event:			
Location of the Event:				
Property Owner (If other than the applicant):  Name:				
Address:				
	Email:			
Signature of Property Owner:		Date:		
Estimated number of participants / spectators:				
Estimated parking requirements:				

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Will food, beverages, or alcohol be sold or dispensed: Yes No		
	equired if selling / dispensing alcohol)	
Estimate of number and location of mo	omitors to control the event:	
Describe the sound amplification equipment that will be used at the event:		
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Decibels:	Projected direction of amplification:	
What sanitary facilities are to be provi	ded for the event (indicate locations on site plan if appropriate):	
Number and type of vehicles animals	structures, or other special equipment that will be used for the event:	
rumber and type of venicles, animals,	structures, or other special equipment that will be used for the event.	
What water and first aid stations will b	be provided for the event:	
Decibels:	Projected direction of amplification:	
Additional information (refer to I coal	Events Ordinance):	
Additional information (refer to Local Events Ordinance):		
Supplemental information (Note: For A	Community and Commercial Events a Tent/Membrane Structure requires a	
	Community and Commercial Events a Tent/Membrane Structure requires a	
permit as well as an inspection by the Fire Marshal; please reference Fire Prevention Permit Application):		
Event route:		
T 1	.1 1 11	
Indemnification agreement – a copy must be attached to this application: Yes No		
Insurance – an original certificate of insurance naming Upper Dublin Township as the additional insured must be		
attached to this application; limits of liability are to be set by Upper Dublin Township): Yes \( \scale \) No \( \scale \)		
Municipal Service Fees (to be determined by Upper Dublin Township prior to approval of the application; proper		
security and fees must be posted befor	e application can be approved:	
Application fee (Non-Refundable):		

Signature of Appl	icant:	Date:		
Permit conditions:				
Name of the Deputy Chief of Police: Daniel Wade				
Approved:	Signature of the Deputy Chief of Police:	Date:		
Denied:	a sg. mare as a significant of a signifi			
Reason(s) for denial:				