

**FORSYTHCOUNTY Board of Commissioners**

# **Special Event Permit**

## **Application/Event Information**

<b>Application Date</b>	<hr/>
<b>Company/Organization</b>	<hr/>
<b>Street Address</b>	<hr/>
<b>City/State/Zip</b>	<hr/>
<b>Contact Person</b>	<hr/>
<b>Phone and Fax</b>	<hr/>
<b>Email</b>	<hr/>

## **Event Information**

<b>Name of Event</b>	<hr/>
<b>Date of Event</b>	<hr/>
<b>Start Time</b>	<hr/>
<b>Finish Time</b>	<hr/>
<b>Projected Attendance</b>	<hr/>
<b>Event Location</b>	<hr/>

**Type of Event (please check)**

<input type="checkbox"/> Parade*	<input type="checkbox"/> Race*	<input type="checkbox"/> Assembly	<input type="checkbox"/> Concert
<input type="checkbox"/> Demonstration	<input type="checkbox"/> March*	<input type="checkbox"/> Motorcade*	
<input type="checkbox"/> Other	<hr/>		

*\*Will require traffic control or event route plan.*

**Road Closure – Will you be requesting a road closure?**

<input type="checkbox"/> No
<input type="checkbox"/> Yes

**If applicable, please indicate here your plan to notify businesses and residents affected by your race route.**

**Name of Partnership or Corporation (if any)** \_\_\_\_\_

**Names and Home Addresses of all Partners (if a partnership)**

\_\_\_\_\_

\_\_\_\_\_

**Names and Home Addresses of all Officers and Directors (if a corporation)**

\_\_\_\_\_

\_\_\_\_\_

**Have you or any of the persons named above ever been arrested or convicted for violation of any ordinance or law of Forsyth County, the state of Georgia, or the federal government, other than minor traffic violations?**

☐

No

☐

Yes

If yes, please indicate the date, description and disposition in each case.

\_\_\_\_\_

\_\_\_\_\_

**WARNING: False statements shall be grounds for immediate revocation of this permit or denial of the application or the basis for denial of future applications. Applications must be legible.**

**By signing below I acknowledge I have read the Special Event Permit Guidelines and the Warning above and I understand my responsibilities concerning this permit application.**

Applicant's Signature

\_\_\_\_\_

The foregoing was signed and sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_\_

\_\_\_\_\_  
**NOTARY PUBLIC**

**My Commission Expires**

\_\_\_\_\_