



## City of Johnstown Special Events Application

Please read, complete, and submit the application below to request/obtain a Special Event permit. A Special Event qualifies as any event, gathering, celebration, etc. being held within the City of Johnstown.

Applications are required to be submitted sixty (60) days in advance. Applications submitted less than sixty (60) days in advance must include an additional \$30.00 late fee; please plan accordingly.

- There is a \$50.00 non-refundable administrative fee for this form.
- This form is not a permit. The completion of the application does not constitute an automatic approval. Applicants will be notified/receive a Special Events license once approval has been received by all applicable City of Johnstown departments.
- Please remit payment by check or money order, made payable to the **City of Johnstown**, with your completed application(s). **No cash or credit cards will be accepted.** Faxed copies of this application will not be accepted.

Any misrepresentation in this application or deviation from the final agreed upon route and/or method of operation described herein may result in the immediate revocation of the permit. Please type or print the information clearly and attach additional sheets or maps as required below.

### Step 1. Event Information

1. Event Name: \_\_\_\_\_
2. Description of Event: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
3. Date(s) of Event: \_\_\_\_\_
4. Hours of Event: \_\_\_\_\_
5. Set-Up Date/Time: \_\_\_\_\_
6. Breakdown Date/Time: \_\_\_\_\_
7. Estimated Attendance (Crowd Size): \_\_\_\_\_

### Step 2. Applicant Information

8. Name of Individual or Organization: \_\_\_\_\_
9. Event Coordinator: \_\_\_\_\_
10. Mailing Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_
11. Phone Number: \_\_\_\_\_
12. Email Address: \_\_\_\_\_

### Step 3. Location Information

14. Location(s) of Event: \_\_\_\_\_

15. Facilities to be used (circle): Park Street(s) Sidewalk(s) River Private Property  
*\* Provide proof of approval from property owner*

16. List route(s) to be used, and/or streets to be closed. Attach Map (required)

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**Step 4. City Equipment / Services Requested**

The City of Johnstown may require certain public safety standards to be met by the event organizer/coordinator.

All services for Police, Fire, and/or Public Works are at an additional cost and not included in the application fee of \$35.00.

The Applicant is solely responsible for the costs incurred for City services rendered for the event.

17. City of Johnstown Police Department

What services are requested from the Police Department: Road/Street Closures Traffic Control Security

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Location(s) & Time(s) Police Department is requested:

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18. City of Johnstown Fire Department

If your Event is expecting 8,000 + people, then you are required to contact the City Fire Chief @ 814.539.0889 in order to create an Emergency Operation Plan.

If you are closing streets and/or having vendor stands on roadways, you are required to maintain accessible fire lane(s) of 11' for the entirety of the Event.

What services are requested from the Fire Department

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Location(s) & Time(s) Fire Department is requested:

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Are you having fireworks: \_\_\_\_\_ No \_\_\_\_\_ Yes

**If yes, you are required to obtain a Fireworks Permit via the Johnstown Fire Department**

Location: \_\_\_\_\_ Start/End Time: \_\_\_\_\_

19. Department of Public Works

Are you requesting to close any roads, streets, and/or intersections: \_\_\_\_\_ No \_\_\_\_\_ Yes

**If yes, please attach a map illustrating the roads, streets, and/or intersections requested**

Set-Up Date/Time: \_\_\_\_\_ Breakdown Date/Time: \_\_\_\_\_

Are you requesting Street Cleaning: \_\_\_\_\_ No \_\_\_\_\_ Yes

If yes, list before, during, or after: \_\_\_\_\_

Are you requesting to hang any signs and/or banners: \_\_\_\_\_ No \_\_\_\_\_ Yes

If yes, date(s) for set-up and breakdown: \_\_\_\_\_

Location(s) of banners: \_\_\_\_\_

Clean-Up Plan: (Please list your clean-up plans and if you are requesting services from JPW such as trash removal, etc.)

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**Step 5. Additional Information**

The City is unable to provide certain amenities such as port-a-johns/portable washrooms, tables, chairs, trash boxes, or tents/canopies. The applicant is required to secure said items for the event at the applicant's own expense. Failure to adequately provide such amenities could result in the event applicant(s) or coordinator(s) inability to hold future events in the City of Johnstown.

20. Amplified Sound

Any amplified sound is subject to all applicable City of Johnstown Ordinances. Copies of all City ordinances can be found at [www.cityofjohnstownpa.net](http://www.cityofjohnstownpa.net).

List Hours (no sound may be used before 7am): \_\_\_\_\_

Locations(s): \_\_\_\_\_

Vendor(s) providing the service: \_\_\_\_\_

21. Stages

If you are planning to utilize staging, please describe:

Quantity: \_\_\_\_\_ Size(s): \_\_\_\_\_

Location(s): \_\_\_\_\_

Vendor(s) providing the service: \_\_\_\_\_

22. Tents

If you are planning to erect tents or canopies, please describe:

Quantity: \_\_\_\_\_ Size(s): \_\_\_\_\_

Location(s): \_\_\_\_\_

Vendor(s) providing the service: \_\_\_\_\_

23. Port-A-Johns & Portable Washrooms

Set-Up Date/Time: \_\_\_\_\_ Breakdown Date/Time: \_\_\_\_\_

Quantity: \_\_\_\_\_ Location(s): \_\_\_\_\_

Vendor(s) providing the service: \_\_\_\_\_

24. Vendors, Corporate Sampling, or Product Giveaways

Will you be requesting and/or have vendors requesting a Peddlers/Solicitors License

\_\_\_\_\_ No \_\_\_\_\_ Yes

If yes, indicate the number/type of vendors:

\_\_\_\_\_ Food/Beverage \_\_\_\_\_ Arts/Craft \_\_\_\_\_ Plants/Flowers \_\_\_\_\_ Jewelry/Make-up

\_\_\_\_\_ Services \_\_\_\_\_ Clothing/Accessories \_\_\_\_\_ Books/Magazines \_\_\_\_\_ Household Items

\*If a vendor sells multiple items, only include the vendor once in the numbers indicated, and indicate vendor by their primary product(s) being sold.

25. Vending/Sales of Alcohol

Is alcohol (beer/wine/liquor) being served, sold, distributed, or consumed: \_\_\_\_\_ No \_\_\_\_\_ Yes

If yes, please check all that apply Beer \_\_\_\_\_ Wine \_\_\_\_\_ Liquor \_\_\_\_\_

**Attach a copy of your liquor license**

No alcohol is permitted without the approval of the PA Liquor Control Board. A copy of the permit must remain on-site for inspector's review. Applicants must apply with the City of Johnstown and/or Commonwealth of Pennsylvania for alcohol, merchandise vending, food vending, and/or other sampling.

**Step 6. Miscellaneous Information**

Special Events cancellations or cancellation of requested services must be made in writing (10) days prior to the event. In the event of inclement weather, cancellations or requests to reschedule must be made in writing at least (48) hours prior to the event. Failure to provide written verification may result in the applicant(s) being required to reimburse the City of Johnstown for agreed upon services.

The Applicant should not assume electrical power is provided at the site and should arrange for their own power needs (i.e. generators, line drops). Electric (power) needs should be discussed further with the appropriate City staff.

**Step 7. Liability Insurance**

Due to the increased risk of personal injury and/or property damage under certain circumstances during special events, liability insurance will be required under the following conditions:

- a. Any Special Event which involves animal(s), fireworks, automobile(s) or other vehicles(s), including but not limited to watercraft, aircraft, or motorcycles, or the sale of food.
- b. When required, the Applicant or, if applicable, the Organizer/Sponsor holding the event shall maintain insurance in the amount specified below to cover the entire duration of the Event. The Applicant shall attach a certificate of insurance duly executed by the officers or authorized representatives of a responsible and non-assessable insurance company, evidencing the minimum coverage(s), as listed below, and specify the City of Johnstown as an additional insured, which insurance shall be non-cancelable, except upon thirty (30) days prior written notice to the City of Johnstown.

	<b>Individual Occurrence</b>	<b>Aggregate</b>
<b>General Liability</b>		
Bodily injury, including death:	\$1,000,000.00	\$2,000,000.00
Property damage:	\$500,000.00	\$1,000,000.00

All policies must be made on an occurrence basis. Claims-made policies are not acceptable.

**Step 8. Affidavit of Applicant**

By signing and submitting the Special Events Application, the sponsoring organization agrees to indemnify, defend and hold harmless the City of Johnstown and its officers, employees, and agents from and against any and all loses, costs (including but not limited to, litigation and settlement costs and counsel fees), claims, suits, actions, damages, liability, and expenses, occasioned wholly or in part by Event sponsor's act or omission or negligence or fault of the act or omission or negligence of fault of Event sponsor's agents, subcontractors, suppliers, employees or servants in connection with the Permit.

I hereby certify that the information contained in the foregoing application is true and correct to the best of my knowledge and belief and that I have read, understand, and agree to abide by the City's ordinances and regulations governing this proposed Special Event. I also agree to comply with all other local, state, and/or federal laws that are applicable to this Event.

I further certify that I, on behalf of myself and/or the Organization/Sponsor, agree to be financially responsible for paying any costs and fees to the City of Johnstown that are incurred by the City or on behalf of the event.

If I cancel my event, I will notify the City, as per the timeframe listed under "Step 6. Miscellaneous Information" so as to cut down on any cost recovery. I understand that I will be charged for all City services provided in advance of the event up through the time of notification.

Legal Name of Organization: \_\_\_\_\_

Authorized Signer: (print name) and Title: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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\_\_\_\_\_ Approved      \_\_\_\_\_ Denied

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Title