City of Rehoboth Beach

229 Rehoboth Avenue P.O. Box 1163 Rehoboth Beach, Delaware 19971



Telephone 302-227-6181 Fax 302-227-4643 www.cityofrehoboth.com

Special Event Permit Application

EVENT DETAILS						
Name of event				Event date	Start time	End time
Request use of						
□ Bandstand	□ Boardwalk	□ Beach		□ Park	□ Other	
Location/address of event # expected attendees # organizers & volunteers						volunteers
					3	
Purpose of event						
Furpose of event						
	de, procession, foot race, wal	lk, concert, blo	ck party, e	tc.); include detailed descript	tion of proposed	route, unique
event features, etc.						
** Applicants must provide n	naps or layouts that illustrate lo	cation of event 8	& associate	d items such as tents, tables, p	ortable bathrooms	s, & trailers. **
Requests related to parkin	g or street closures					
** A DelDOT special ev	ent permit is required prior to the	ne issuance of a	City of Reh	noboth Beach Special Event Pe	ermit for any event	affecting
roadways open to traffic. See DelDOT's policy on special events at https://deldot.gov/Business/planned_spec_events/index.shtml **						
Requests for placement/use of tents, tables, portable bathrooms, and other moveable structures (e.g., trailers, signs)						
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** Applicants must provide maps or layouts that illustrate location of event & associated items such as tents, tables, portable bathrooms, & trailers. **						
Types of vehicles to be used by organizers, volunteers, etc. # of vehicles						
Types of vehicles to be us	ed by organizers, volunteers,	, 616.	# Or veni	UIC3		

ADDITIONAL REQUESTS							
# of extra duty police officers requ	ested		Proposed rain date	Rain date start time	Rain date end time		
Reason for requested police officers							
Additional equipment requests (e.g., extra trash cans, audio equipment, etc.)							
Name of person making request			Signature of person making request				
CONTACT INFORMATION							
Name of applicant		Name of onsite contact					
Address			Address				
Cell phone #	Cell phone #						
Email address	Email address						
Name of co-applicant	Name of additional onsite contact						
Address		Address					
Date of birth	Cell phone #	Date of b	irth	Cell phone #			
Email address		Email ad	dress				
BILLING INFORMATION							
Name of billing contact			s phone #	Cell phone #			
Name of organization		EIN#					
Billing address		Email address					
Signature of applicant		Date					
ACKNOWLEDGEMENT							
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The undersigned applicant acknowledges that s/he has read the City of Rehoboth Beach terms and conditions related to special event applications. The applicant also agrees that applicant and event participants will conform to applicable state laws, city ordinances, by-laws, and regulations as well as any special requirements that may be made a condition of granting a special event permit pursuant to this application. I/We agree to hold the City of Rehoboth Beach harmless from any and all liability and will defend the City of Rehoboth Beach in connection the connection th							
Signature of applicant		Date					

INTERNAL USE ONLY					
Date application received E	Extra Duty Officer Application □ Yes □ No				
Application fee received	DelDOT Special Event Permit □ Yes □ No				
Facility fee received In	Insurance Certificate □ Yes □ No				
C	ovid Safety Plan □ Yes □ No				
D	eposit □ Yes □ No				
Signature of City Manager	Date				
Signature of Chief of Police	Date				