



CITY OF CLIVE
 1900 NW 114th Street
 Clive, IA 50325-7077
 Phone (515)223-6221
 Fax (515) 457-3091
 www.cityofclive.com

**APPLICATION FOR OUTDOOR
 (SPECIAL) EVENT PERMIT**

APPLICATION DATE	PERMIT TYPE Special Event	PIN
PERMIT NO.	DATE ISSUED	EXP. DATE
ZONING	GROUP N/A	TYPE CONST N/A
BUILDING ADDRESS/SUITE NO. (if applicable)	LOT #	SUBDIVISION

PROJECT INFORMATION

BUILDING ADDRESS/SUITE NO. (if applicable) _____

BUSINESS NAME _____

BUSINESS CONTACT/PHONE _____

E-MAIL ADDRESS _____

OWNER PHONE _____

DESCRIPTION OF EVENT

TENT INFORMATION (if applicable)

Name of owner of tent _____

Size of Tent _____

Flame retardent treatment used _____

Date of last treatment _____

***Please attach sketch of property and location of Outdoor Event indicating adequate parking and access to be maintained.*

SPECIAL OUTDOOR EVENT REQUIREMENTS

1. Special outdoor events shall maintain fire and emergency access at all times.
2. Special outdoor events shall not create a burden on parking and access facilities.
3. A basic site plan must be submitted in addition to this application. Please show the existing building, parking and access points, etc. in relation to the event area.
4. If a tent over 200 s.f. will be used, a certificate of flame resistance must accompany this application.
5. If a tent over 200 s.f. will be used, the Fire Marshal must be contacted for inspection prior to the event. Phone: (515)223-1595.
6. An outdoor liquor license and/or noise permit, if applicable, shall be required in addition to this permit.

PERMIT FEES

Outdoor Event	_____
Seasonal Sales Event	_____
Temporary Site Plan	_____
TOTAL	_____

- Approved** **Approved with conditions (see below)**
 Denied (see below)

I hereby acknowledge that I have read this application and state that the information supplied with this application is correct and agree to comply with all city ordinances and state laws during this event.

 Please print Owner or Authorized Agent's Name

 Signature of Owner or Authorized Agent _____
 Date

 Planner or Authorized Representative _____
 Date