

## Township of Raritan Special Events Permit Request

Date of Application: \_\_\_\_\_ Permit Number: \_\_\_\_\_

(Official Use Only)

Event organization and address:	Name & address of primary contact person:
Phone:	Cell#:
Event Website:	Email:

Event Name: \_\_\_\_\_ Event Date(s): \_\_\_\_\_

Event Start time: \_\_\_\_\_ End Time: \_\_\_\_\_ Set-up & Breakdown Times: \_\_\_\_\_

Location of Event: \_\_\_\_\_

Description of Event:

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Estimated No. of Participants: \_\_\_\_\_ Estimated No. of Spectators: \_\_\_\_\_

***The following questions will help indicate which Departments will need additional follow-up or permitting.***

Will your event take place on Township or Board of Ed. Property?     Y  N     Y  N

Will your event require street closings?    Y    N

Will you need to block parking spaces?    Y    N

Will your event take place after dark?    Y    N

Will there be vendors?    Y    N

Describe Vendors: \_\_\_\_\_

Will there be food served/sold?    Y    N

Will there be food trucks?    Y    N

Will there be cooking/food prep on site?    Y    N

Will there be alcohol?    Y    N

Will there be raffles/games of chance?    Y    N

Will there be electricity use?    Y    N

Generator Use? Y    N

Will there be an open flame or heaters?    Y    N

Use of temporary tents?    Y    N

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

Use of inflatable structures?    Y    N

Use of a Stage?    Y    N

Use of amusement rides or equipment?    Y    N

Use of banners or signage?    Y    N

Do you have a traffic/parking plan?    Y    N

Do you have an EMS/Medical Plan?    Y    N

Do you have a security plan?    Y    N

Permittee understands that non-compliance may result in revocation of this permit. If Permittee is an organization, the undersigned certifies that he/she is authorized to sign on behalf of Permittee.

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

Fee Amount: \$50.00 Check No.: \_\_\_\_\_ Insurance Policy Number: \_\_\_\_\_

*Submit completed forms to [clerk@raritantwpnj.gov](mailto:clerk@raritantwpnj.gov)*

Department	Comments & Anticipated Permit Requirements
CERT	
Finance	
Fire	
Police	
Administration	
Health	
Public Works	
Construction	
Zoning	
Clerk	

**Terms and Conditions:**

1. The Township of Raritan retains the authority to revoke a permit and/or stop a use in progress upon reasonable notification and the opportunity to cure a violation of the conditions or standards for issuance.
2. By signing above, the individual requesting the facility/facilities on behalf of the Applicant Group:
  - Understands that approval of this application will be withheld until payment is received and a Certificate of Insurance is secured, which includes the following information:
  - Raritan Township is listed as an Additional Insured party.
  - Liability limits of \$1,000,000 for each occurrence of personal injury and bodily injury/property damage.
  - The Applicant Group will indemnify and hold harmless the Township of Raritan, and its officers, agents, and employees from all liability, injury, damage and loss to any person and any property arising from or relating to the permitted activity, even if due wholly or partly to the negligence of the Township or its officers, agents, or employees.
3. All applicants must provide a minimum of two (2) weeks' notice and all requests may be subject to approval of the Township Committee depending on the reason and/or type of request.